| Fill in this information to i | dentify your case:            |                                      |
|-------------------------------|-------------------------------|--------------------------------------|
| United States Bankruptcy C    | ourt for the:                 |                                      |
| EASTERN DISTRICT OF N         | EW YORK                       |                                      |
| Case number (if known)        | Chapter you are filing under: |                                      |
|                               | ☐ Chapter 7                   |                                      |
|                               | ☐ Chapter 11                  |                                      |
|                               | ☐ Chapter 12                  |                                      |
|                               | ☐ Chapter 13                  | ☐ Check if this is an amended filing |

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Identify Yourself About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on Krishna Mahadai your government-issued First name First name picture identification (for example, your driver's license or passport). Middle name Middle name Bring your picture Bhagwandeen Bhagwandeen identification to your Last name and Suffix (Sr., Jr., II, III) Last name and Suffix (Sr., Jr., II, III) meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and AKA Larry B AKA Annie B doing business as names. Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition. Only the last 4 digits of your Social Security number or federal xxx-xx-6418 xxx-xx-6407 Individual Taxpaver Identification number (ITIN)

|                   | otor 1    Krishna Bhagwan<br>otor 2 <u>Mahadai Bhagwa</u> i |   | Case number (if known)  |  |  |  |
|-------------------|---|---|---|--|--|--|
|                   | Your Employer   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |  |
| 4.                | Identification Number<br>(EIN), if any.                     | EIN   | EIN   |  |  |  |
| 5. Where you live |   | 97-22 108th Street<br>South Richmond Hill, NY 11419   | If Debtor 2 lives at a different address:   |  |  |  |
|                   |   | Number, Street, City, State & ZIP Code Queens   | Number, Street, City, State & ZIP Code  |  |  |  |
|                   |   | County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                   | County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |  |  |  |
|                   |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |  |  |  |
| 6.                | Why you are choosing this district to file for bankruptcy   | Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |  |  |  |
|                   |   |   |   |  |  |  |

|      | Debtor 2 Mahadai Bhagwandeen  Mahadai Bhagwandeen   |   |  | Case number (if known)  |  |  |
|------|---|---|--|---|--|--|
| Part | 2: Tell the Court About \   | /our Bankrunto  | y Caso   |   |  |  |
| 7.   | The chapter of the Bankruptcy Code you are choosing to file under   | Check one. (Fo  | or a brief description<br>Also, go to the top of<br>1  | of each, see <i>Notice Required by a</i> page 1 and check the appropriate   | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.  |  |
| 8.   | How you will pay the fee  | about ho order. If a pre-pri I need to The Filin I reques but is no applies t | w you may pay. Typ<br>your attorney is subr<br>nted address.<br>o pay the fee in inst<br>g Fee in Installments<br>t that my fee be wa<br>t required to, waive y<br>o your family size an | cically, if you are paying the fee yo mitting your payment on your behand tallments. If you choose this options (Official Form 103A).  Ived (You may request this option your fee, and may do so only if your do you are unable to pay the fee in | with the clerk's office in your local court for more detaurself, you may pay with cash, cashier's check, or monalf, your attorney may pay with a credit card or check wen, sign and attach the <i>Application for Individuals to Pay</i> an only if you are filing for Chapter 7. By law, a judge mayur income is less than 150% of the official poverty line to installments). If you choose this option, you must fill or ial Form 103B) and file it with your petition. |  |
| 9.   | Have you filed for bankruptcy within the last 8 years?  | Dis   | tricttrict   | When When When  | Case number Case number Case number  |  |
|      | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ⊠ No ☐ Yes.   | otor   |   | Relationship to you  |  |
|      |   | Del   | trict<br>otor<br>trict   | When When   | Case number, if known Relationship to you Case number, if known  |  |
| 11.  | Do you rent your residence?   |   | No. Go to line   | itial Statement About an Eviction J   | you?<br>Sudgment Against You (Form 101A) and file it as part of  |  |

|     | <sub>tor 1</sub> Krishna Bhagwand<br>tor 2 <u>Mahadai Bhagwan</u>  |                        |  | Case number (if known)  |
|-----|--|------------------------|--|---|
| Par | 13: Report About Any Bu  | ısinesses              | You Own as a Sole Proprieto  | or  |
| 12. | Are you a sole proprietor of any full- or part-time business?  | ⊠ No.                  | Go to Part 4.  |   |
|     |  | ☐ Yes.                 | Name and location of busi  | ness  |
|     | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. |                        | Name of business, if any   |   |
|     | If you have more than one sole proprietorship, use a separate sheet and attach   |                        | Number, Street, City, State  | e & ZIP Code  |
|     | it to this petition.   |                        | Check the appropriate box  | to describe your business:  |
|     |  |                        | ☐ Health Care Busine   | ess (as defined in 11 U.S.C. § 101(27A))  |
|     |  |                        | ☐ Single Asset Real  | Estate (as defined in 11 U.S.C. § 101(51B))   |
|     |  |                        |  | fined in 11 U.S.C. § 101(53A))  |
|     |  |                        | · · · · · · · · · · · · · · · · · · ·  | (as defined in 11 U.S.C. § 101(6))  |
|     |  |                        | None of the above  |   |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code, and<br>are you a small business<br>debtor?   | deadlines<br>operation | s. If you indicate that you are a  | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure |
| 1   | For a definition of small  | ☐ No.                  | I am not filing under Chapt  | ter 11.   |
|     | business debtor, see 11<br>U.S.C. § 101(51D).  | ⊠ No.                  | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in th Code. |   |
|     |  | ☐ Yes.                 |  | 1, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.   |
|     |  | ☐ Yes.                 |  | 1, I am a small business debtor according to the definition in the Bankruptcy Code, and Subchapter V of Chapter 11.   |
| Par | Report if You Own or   | Have Any               | Hazardous Property or Any  | Property That Needs Immediate Attention   |
| 14. | Do you own or have any   | ⊠ No.                  |  |   |
|     | property that poses or is alleged to pose a threat   | ☐ Yes.                 |  |   |
|     | of imminent and  |                        | What is the hazard?  |   |
|     | identifiable hazard to public health or safety?  |                        |  |   |
|     | Or do you own any  |                        |  |   |
|     | property that needs immediate attention?   |                        | If immediate attention is needed, why is it needed?  |   |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?                                |                        | Where is the property?   |   |
|     |  |                        |  | Number, Street, City, State & Zip Code  |
|     |  |                        |  |   |

Case 1-25-40906-ess Filed 02/21/25 Entered 02/21/25 17:58:04 Debtor 1 Krishna Bhagwandeen Mahadai Bhagwandeen Debtor 2 Case number (if known) Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5: **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit □ I received a briefing from an approved credit counseling agency within the 180 days before I filed briefing about credit counseling agency within the 180 days before I counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. You must truthfully check I received a briefing from an approved credit ☐ I received a briefing from an approved credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed one of the following filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a choices. If you cannot do a certificate of completion. certificate of completion. so, you are not eligible to file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about ☐ I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or makes me incapable of realizing or making rational making rational decisions about finances. decisions about finances. Disability. Disability. My physical disability causes me to be My physical disability causes me to be unable to unable to participate in a briefing in person, participate in a briefing in person, by phone, or by phone, or through the internet, even after through the internet, even after I reasonably tried to

do so.

Active duty.

combat zone.

of credit counseling with the court.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver

I reasonably tried to do so.

military combat zone.

I am currently on active military duty in a

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

Active duty.

|      | tor 1 Krishna Bha<br>tor 2 Mahadai Bh  |  |   |                                  | Case nu  | umber (if known)   |  |  |
|------|--|--|---|----------------------------------|--|--|--|--|
| Part | : 6: Answer Thes   | e Question   | s for Reporti   | na Purposes                      |  |  |  |  |
|      | What kind of debt  |  |   |                                  | er debts? Consumer debts are                                       | e defined in 11 U.S.C. § 101(8) as "incurred by an   |  |  |
|      | you have?  |  |   | dual primarily for a personal, f |  | ,  |  |  |
|      |  |  | □ N   | o. Go to line 16b.               |  |  |  |  |
|      |  |  | ⊠ Y   | es. Go to line 17.               |  |  |  |  |
|      |  | 10   |   |                                  | s debts? Business debts are d<br>t or through the operation of the | ebts that you incurred to obtain business or investment.   |  |  |
|      |  |  | □N  | o. Go to line 16c.               |  |  |  |  |
|      |  |  | ☐ Y   | es. Go to line 17.               |  |  |  |  |
|      |  | 10   | 6c. State   | the type of debts you owe that   | t are not consumer debts or bu                                     | siness debts   |  |  |
|      |  |  |   |                                  |  |  |  |  |
| 17.  | Are you filing und Chapter 7?  | er 🛭   | ∐ No. Iam   | not filing under Chapter 7. Go   | to line 18.  |  |  |  |
|      | Do you estimate the after any exempt   | hat [  |   |                                  | estimate that after any exempt to distribute to unsecured cred     | property is excluded and administrative expenses itors?  |  |  |
|      | property is exclud   |  | ·   |                                  |  |  |  |  |
|      | administrative exp   |  | □ N   |                                  |  |  |  |  |
|      | be available for   |  | ☐ Y   | es                               |  |  |  |  |
|      | distribution to uns<br>creditors?  | secured  |   |                                  |  |  |  |  |
| 18.  | How many Credito   |  | ₫ 1-49  |                                  | <u> </u>   | <u> </u>   |  |  |
|      | you estimate that owe?   | you  | ] 50-99<br>] 100-199  |                                  | ☐ 5001-10,000<br>☐ 10,001-25,000                                   | ☐ 50,001-100,000<br>☐ More than100,000   |  |  |
|      | OWE:   |  | 200-999   |                                  |  |  |  |  |
| 19.  | How much do you  |  | □ \$0 - \$50,000<br>□ \$50,001 - \$100,000<br>□ \$100,001 - \$500,000   |                                  | \$1,000,001 - \$10 million   | \$500,000,001 - \$1 billion  |  |  |
|      | estimate your ass be worth?  |  |   |                                  | \$10,000,001 - \$50 million<br>\$50,000,001 - \$100 million        | ☐ \$1,000,000,001 - \$10 billion<br>☐ \$10,000,000,001 - \$50 billion                            |  |  |
|      | De Worth.  |  | \$500,001 - \$  |                                  | \$100,000,001 - \$500 million                                      |  |  |  |
| 20.  | How much do you  |  | ] \$0 - \$50,000  |                                  | □ \$1,000,001 - \$10 million                                       | □ \$500,000,001 - \$1 billion  |  |  |
|      | estimate your liab to be?  |  | ] \$50,001 - \$<br><b>]</b> \$100,001 - \$  |                                  | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million       | □ \$1,000,000,001 - \$10 billion<br>□ \$10,000,000,001 - \$50 billion                            |  |  |
|      | 10 00.   |  | \$500,001 - \$  |                                  | \$100,000,001 - \$500 million                                      |  |  |  |
| Part | :7: Sign Below   |  |   |                                  |  |  |  |  |
| For  | you  | 11   | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  |                                  |  |  |  |  |
|      |  |  | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. |                                  |  |  |  |  |
|      |  | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). |   |                                  |  |  |  |  |
|      | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. |  |   |                                  | , specified in this petition.                                      |  |  |  |
|      |  | b  |   |                                  |  | ney or property by fraud in connection with a o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, |  |  |
|      |  |  |   | nagwandeen                       | /s/ Mahadai  | Bahagwandeen   |  |  |
|      |  | K  | rishna Bhag   | wandeen                          | Mahadai Bha  | agwandeen  |  |  |
|      |  | S  | ignature of De  | edior 1                          | Signature of D   | PEDIOF Z   |  |  |
|      |  | Е  | xecuted on  | February 21, 2025                | Executed on  | February 21, 2025  |  |  |
|      |  |  | _   | MM / DD / YYYY                   | <u> </u>   | MM / DD / YYYY   |  |  |

#### Case 1-25-40906-ess Doc 1 Filed 02/21/25 Entered 02/21/25 17:58:04

| Debtor 1 Krishna Bhagwano Debtor 2 Mahadai Bhagwan                             |  | Case number (if known)   |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
| For your attorney, if you are represented by one If you are not represented by | under Chapter 7, 11, 12, or 13 of title 11, United for which the person is eligible. I also certify the 342(b) and, in a case in which § 707(b)(4)(D) ap | States Code, and have exact I have delivered to the oplies, certify that I have no | debtor(s) the notice required by 11 U.S.C. § |  |  |
| an attorney, you do not need to file this page.                                | in the schedules filed with the petition is incorrec   | t.   |  |  |  |
| to me uno page.  | /s/ H Bruce Bronson  | Date   | February 21, 2025                            |  |  |
|  | Signature of Attorney for Debtor   |  | MM / DD / YYYY                               |  |  |
|  | H Bruce Bronson  |  |  |  |  |
|  | Printed name   |  |  |  |  |
|  | Bronson Law Offices PC   |  |  |  |  |
|  | Firm name  |  |  |  |  |
|  | 480 Mamaroneck Ave   |  |  |  |  |
|  | HarrisonHarrison, NY 10528   |  |  |  |  |
|  | Number, Street, City, State & ZIP Code   |  |  |  |  |
|  | Contact phone (914) 269-2530   | Email address  | hbbronson@bronsonlaw.net                     |  |  |
|  | 1679380 NY   |  |  |  |  |
|  | Bar number & State   |  | <del></del>                                  |  |  |
|  |  |  |  |  |  |

| Fill in this infor              | mation to identify yo   | our case:   |                               |  |
|---------------------------------|-------------------------|---|-------------------------------|--|
| Debtor 1                        | Krishna Bhagwa          |   |                               |  |
|                                 | First Name              | Middle Name   | Last Name                     |  |
| Debtor 2<br>(Spouse if, filing) | Mahadai Bhagv           | Vandeen Middle Name                                     | Last Name                     |  |
| (Speace ii, iiiiig)             | , not realis            | made Hame   | Lastrianie                    |  |
| United States Ba                | ankruptcy Court for the | e: <u>EASTERN DISTRICT C</u>                            | F NEW YORK                    |  |
| Case number                     |                         |   |                               |  |
| (if known)                      |                         |   |                               | ☐ Check if this is an  |
|                                 |                         |   |                               | amended filing   |
|                                 |                         |   |                               |  |
| B 104                           |                         |   |                               |  |
|                                 | dual Chante             |   | of Craditors Who              | Have the 20 Largest  |
|                                 | -                       |   |                               | nave the 20 Largest  |
| Unsecure                        | d Claims Aç             | gainst You and <i>A</i>                                 | Are Not Insiders              | 12/1   |
|                                 |                         |   |                               |  |
|                                 |                         |   |                               | ou are filing under Chapter 7, Chapter 12, or  |
|                                 |                         |   |                               | ers include your relatives; any general partners<br>ns of which you are an officer, director, persor |
| in control, or ow               | ner of 20 percent or    | more of their voting securi                             | ties; and any managing agent, | including one for a business you operate as a  |
|                                 |                         | Also, do not include claims among the holders of the 20 |                               | e unsecured claim resulting from inadequate  |
| conateral value                 | piaces the creditor a   | iniong the holders of the 20                            | iargest unsecured ciaims.     |  |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

|   | -   |         | •  | •                      |                    |
|---|---|---------|--|------------------------|--------------------|
|   |   |         |  |                        | Unsecured claim    |
| 1 | 1   | What i  | s the nature of the claim?   | Claim for Compensation | <u>\$17,500.00</u> |
|   | Alister Wint C/O Jesse S. Barton, Esq. CSM Legal P.C. 60 East 42nd Street Suite 4510 New York, NY 10165 | As of t | he date you file, the claim is:<br>Contingent<br>Unliquidated<br>Disputed<br>None of the above apply | Check all that apply   |                    |
|   |   |         |  |                        |                    |
|   | Contact   |         | No<br>Yes. Total claim (secured and<br>Value of security:  | d unsecured)           |                    |
|   | Contact phone   |         | Unsecured claim  |                        |                    |
| 2 | Amex  | What i  | s the nature of the claim?   | Credit card purchases  | \$1,167.00         |
|   | PO Box 981537<br>El Paso, TX 79998-1537   | As of t | he date you file, the claim is:<br>Contingent<br>Unliquidated<br>Disputed<br>None of the above apply | Check all that apply   |                    |
|   |   | Does t  | he creditor have a lien on you   | ır property?           |                    |
|   | Contact   |         | No<br>Yes. Total claim (secured and  | d unsecured)           |                    |
|   | (800) 528-4800<br>Contact phone   |         | Value of security:<br>Unsecured claim  |                        |                    |

B104 (Official Form 104)

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims

| Mahadai Bhagwandeen   | Case number (if known)   |
|---|--|
| A ====:   | What is the nature of the claim?   |
| Amex<br>PO Box 981537<br>El Paso, TX 79998-1537                           | As of the date you file, the claim is: Check all that apply  ☐ Contingent ☐ Unliquidated ☐ Disputed ☑ None of the above apply  |
|   | Does the creditor have a lien on your property?  |
| Contact   | ⊠ No<br>□ Yes. Total claim (secured and unsecured)   |
| (800) 528-4800<br>Contact phone   | Value of security: Unsecured claim   |
|   | What is the nature of the claim? Credit card purchases \$3,954.00  |
| Capital One<br>PO Box 31293<br>Salt Lake City, UT 84131-0293              | As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed None of the above apply   |
|   | Does the creditor have a lien on your property?  |
| Contact   | No □ Yes. Total claim (secured and unsecured) Value of security: -   |
| Contact phone   | Unsecured claim  |
| Discover Financial<br>PO Box 30939<br>Salt Lake City, UT 84130-0939       | What is the nature of the claim? Credit card purchases \$7,085.00  As of the date you file, the claim is: Check all that apply  ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply |
|   | Does the creditor have a lien on your property?  |
| Contact   | ⊠ No<br>□ Yes. Total claim (secured and unsecured)   |
| (800) 347-5515<br>Contact phone   | Value of security: Unsecured claim   |
| Franpo Realty, LLC<br>42 West 42nd St.<br>2nd Floor<br>Brooklyn, NY 11212 | What is the nature of the claim?  Breach of contract claim  \$54,458.68  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed None of the above apply   |
|   | Does the creditor have a lien on your property?  |

B 104 (Official Form 104)

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims

|   | nagwandeen<br>Shagwandeen | (               | Case number (if known)  |             |                            |       |             |
|---|---------------------------|-----------------|---|-------------|----------------------------|-------|-------------|
| Contact  Contact phone                          |                           |                 | No Yes. Total claim (secured and unsecured) Value of security: Unsecured claim              |             |                            |       |             |
|   |                           | What            | is the nature of the clai   | im?         | Credit card purch          | nases | \$10,217.00 |
| Jpmcb PO Box 15369 Wilmington, DE               | E 19850-5369              | As of           | the date you file, the cl<br>Contingent<br>Unliquidated<br>Disputed<br>None of the above ap |             | eck all that apply         |       |             |
|   |                           |                 | the creditor have a lien  | on your p   | property?                  |       |             |
| Contact  Contact phone                          |                           | - X<br>- D      | No<br>Yes. Total claim (secu<br>Value of securit<br>Unsecured clair                         | ty:         | nsecured)<br><br>-         |       |             |
|   |                           | What            | is the nature of the clai   | im?         | Credit card purch          | 22565 | \$1,136.00  |
| Jpmcb<br>PO Box 15369<br>Wilmington, DE         | E 19850-5369              |                 | the date you file, the cl<br>Contingent<br>Unliquidated<br>Disputed<br>None of the above ap | laim is: Ch | •                          | 14303 | Ψ1,130.00   |
|   |                           | Does            | the creditor have a lien  | on your p   | property?                  |       |             |
| Contact Contact phone                           |                           | - <u> </u>      | No<br>Yes. Total claim (secu<br>Value of securit<br>Unsecured clain                         | ty:         | nsecured) -<br>-<br>-<br>- |       |             |
|   |                           | What            | is the nature of the clai   | im?         | Credit card purch          | nases | \$1,511.00  |
| Macy's/ DSNB<br>PO Box 6789<br>Sioux Falls, SD  | ) 57117-6789              | As of           | the date you file, the cl<br>Contingent<br>Unliquidated<br>Disputed<br>None of the above ap |             | eck all that apply         |       |             |
|   |                           | Does            | the creditor have a lien  | on your p   | property?                  |       |             |
| Contact   |                           | - X             | No<br>Yes. Total claim (secu  | ured and ur | nsecured)                  |       |             |
| (800) 437-2646<br>Contact phone                 | 3                         | -               | Value of securit<br>Unsecured clair   |             | - <u>-</u><br>-            |       |             |
|   |                           | What            | is the nature of the clai   | im?         | Credit card purch          | nases | \$2,343.00  |
| Nordstrom FSE<br>13531 E Caley<br>Englewood, CC | Ave                       | As of<br>□<br>□ | the date you file, the cl<br>Contingent<br>Unliquidated                                     | laim is: Ch | eck all that apply         |       |             |

B 104 (Official Form 104)

| Debtor Debtor |   | Case number (if known)   |
|---------------|---|--|
|               |   | <ul><li>☑ Disputed</li><li>☑ None of the above apply</li></ul>   |
|               |   | Does the creditor have a lien on your property?  |
|               | Contact Contact phone   | No Yes. Total claim (secured and unsecured) Value of security: Unsecured claim   |
| 11            | Degine Felten   | What is the nature of the claim? Legal Fees and Costs \$0.00   |
|               | Regina Felton Felton & Associates 1371 Fulton Street Brooklyn, NY 11216 | As of the date you file, the claim is: Check all that apply  ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply  |
|               |   | Does the creditor have a lien on your property?  |
|               | Contact   | No Yes. Total claim (secured and unsecured) Value of security: -   |
|               | Contact phone   | Unsecured claim  |
| 12            | Verizon Wireless<br>Minneapolis, MN 55426                               | What is the nature of the claim? Utilities \$1,133.00  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed None of the above apply |
|               | _   | Does the creditor have a lien on your property?  ☑ No  |
|               | Contact   | Yes. Total claim (secured and unsecured)   |
|               | (888) 807-5619<br>Contact phone   | Value of security: - Unsecured claim   |
| Part 2:       | Sign Below  |  |
|               |   | amostics are vided in this form is two and source.   |
| •             | penaity of perjury, I declare that the inf<br>/ Krishna Bhagwandeen     | ormation provided in this form is true and correct.  X /s/ Mahadai Bahagwandeen  |
| Kr            | rishna Bhagwandeen<br>gnature of Debtor 1                               | Mahadai Bhagwandeen<br>Signature of Debtor 2   |
| Da            | ate February 21, 2025   | Date February 21, 2025   |

| Fill   | in this informa               | ition to identify your case:   |           |                                |                        |
|--------|-------------------------------|--|-----------|--------------------------------|------------------------|
| Deb    | otor 1                        | Krishna Bhagwandeen  |           |                                |                        |
| Det    | otor 2                        | First Name Middle Name Last Name  Mahadai Bhagwandeen  |           |                                |                        |
|        | use if, filing)               | First Name Middle Name Last Name   |           |                                |                        |
| Uni    | ted States Bank               | ruptcy Court for the: EASTERN DISTRICT OF NEW YORK   |           |                                |                        |
|        | se number                     |  | _         |                                |                        |
| (if kn | own)                          |  |           | neck if th<br>nended f         |                        |
|        |                               | <u> </u>   |           |                                |                        |
| Of     | ficial Forr                   | n 106Sum   |           |                                |                        |
|        |                               | Your Assets and Liabilities and Certain Statistical Information  |           | 12/1                           | 5                      |
| info   | rmation. Fill ou              | d accurate as possible. If two married people are filing together, both are equally responsible it all of your schedules first; then complete the information on this form. If you are filing amens, you must fill out a new <i>Summary</i> and check the box at the top of this page. |           |                                |                        |
| Par    | t 1: Summar                   | ize Your Assets  |           |                                |                        |
|        |                               |  |           | ur assets<br>ue of wh          | <b>s</b><br>at you own |
| 1.     | Schedule A/E<br>1a. Copy line | B: Property (Official Form 106A/B) 55, Total real estate, from Schedule A/B  | \$_       |                                | 650,000.00             |
|        | 1b. Copy line                 | 62, Total personal property, from Schedule A/B   | \$_       |                                | 26,300.00              |
|        | 1c. Copy line 6               | 63, Total of all property on Schedule A/B  | \$_       |                                | 676,300.00             |
| Par    | t 2: Summar                   | ize Your Liabilities   |           |                                |                        |
|        |                               |  |           | <b>ır liabilit</b><br>ount you |                        |
| 2.     |                               | Creditors Who Have Claims Secured by Property (Official Form 106D) otal you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  | \$_       |                                | 103,490.00             |
| 3.     |                               | Creditors Who Have Unsecured Claims (Official Form 106E/F) total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$_       |                                | 0.00                   |
|        | 3b. Copy the                  | total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>  | \$_       |                                | 101,223.68             |
|        |                               |  |           |                                |                        |
|        |                               | Your total liabilities   | \$        | 2                              | 204,713.68             |
| Par    | t 3: Summar                   | ize Your Income and Expenses   |           |                                |                        |
| 4.     |                               | our Income (Official Form 106I)  |           |                                |                        |
|        |                               | nbined monthly income from line 12 of Schedule I   | \$_       |                                | 3,900.00               |
| 5.     |                               | our Expenses (Official Form 106J) nthly expenses from line 22c of Schedule J   | \$_       |                                | 3,000.00               |
| Par    | t 4: Answer                   | These Questions for Administrative and Statistical Records   |           |                                |                        |
| 6.     |                               | for bankruptcy under Chapters 7, 11, or 13?<br>have nothing to report on this part of the form. Check this box and submit this form to the court with y  | our othe  | r schedu                       | les.                   |
| 7.     | ⊠ Yes<br>What kind of         | debt do you have?  |           |                                |                        |
|        |                               | ots are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a " 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.   | a persona | al, family                     | , or household         |
|        |                               | ots are not primarily consumer debts. You have nothing to report on this part of the form. <i>Check this</i> in your other schedules.  | box and   | submit t                       | this form to the       |
|        |                               |  |           |                                |                        |

| Debtor 1<br>Debtor 2 | Krishna Bhagwandeen  Mahadai Bhagwandeen  Case number (if known)   |                |
|----------------------|--|----------------|
|                      | n the <i>Statement of Your Current Monthly Income</i> : Copy your total current monthly income from Official Form A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14. | \$<br>3,500.00 |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total | claim |
|--|-------|-------|
| From Part 4 on Schedule E/F, copy the following:   |       |       |
| 9a. Domestic support obligations (Copy line 6a.)   | \$    | 0.00  |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$    | 0.00  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$    | 0.00  |
| 9d. Student loans. (Copy line 6f.)   | \$    | 0.00  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$    | 0.00  |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$   | 0.00  |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$    | 0.00  |

| Fill in this inform  | ation to identif                              | y your case a                     | ınd this filin             | ıg:                                  |                                       |                |                                   |                |  |               |
|--|---|-----------------------------------|----------------------------|--------------------------------------|---------------------------------------|----------------|-----------------------------------|----------------|--|---------------|
| Debtor 1   | Krishna Bha                                   |                                   | Middle Name                |                                      | Last Name                             |                |                                   |                |  |               |
| Debtor 2<br>(Spouse, if filing)  | Mahadai Bha                                   | agwandeen                         | Middle Name                |                                      | Last Name                             |                |                                   |                |  |               |
| United States Bar  | nkruptcy Court fo                             | r the: <u>EAST</u>                | ERN DISTR                  | ICT OF NEW                           | YORK                                  |                |                                   |                |  |               |
| Case number  |   |                                   |                            |                                      | _                                     |                |                                   |                | _  | if this is an |
|  |   |                                   |                            |                                      |                                       |                |                                   |                | amend  | ed filing     |
| Official For   | m 106A/E                                      | 3                                 |                            |                                      |                                       |                |                                   |                |  |               |
| Schedule   | e A/B: P                                      | -<br>ropert                       | y                          |                                      |                                       |                |                                   |                | 12/15  |               |
| In each category, se think it fits best. B information. If more Answer every quest  Part 1: Describe E | e as complete and<br>space is needed,<br>ion. | d accurate as p<br>attach a separ | ossible. If twate sheet to | o married peopl<br>this form. On the | le are filing togethe                 | er, both are o | equally resp                      | onsible for s  | upplying corre   | ect           |
| No. Go to Part     Yes. Where is   | 2.  | equitable intere                  | est in any res             | idence, building                     | յ, land, or similar p                 | oroperty?      |                                   |                |  |               |
| 1.1<br>97-22 108th<br>Street address, if   | n Street<br>Favailable, or other de           | scription                         | <b>W</b> ha<br>□           | Single-family I                      |                                       | ,              | the amount                        | of any secure  | aims or exempt<br>d claims on <i>Sc</i><br>ns Secured by | hedule D:     |
| South Rich   | mond NY                                       | 11419<br>ZIP Code                 |                            | Condominium  Manufactured  Land      | or cooperative or mobile home operty  |                | Current va<br>entire prop<br>\$65 |                | Current value portion you                                |               |
|  |   |                                   | □<br>□<br>Who              | Other                                | t in the property?                    | Check one      | (such as fe                       |                | our ownership<br>ancy by the er                          |               |
| Queens   |   |                                   |                            | Debtor 1 only                        |                                       |                |                                   |                |  |               |
| County   |   |                                   |                            | Debtor 1 and                         | Debtor 2 only<br>f the debtors and an | nother         |                                   | if this is com | nmunity prope  | rty           |
|  |   |                                   |                            | =                                    | ou wish to add abo                    |                | •                                 | ,              |  |               |
|  |   |                                   |                            |                                      |                                       |                |                                   |                |  |               |
| 2. Add the dolla pages you ha  |   |                                   |                            |                                      | from Part 1, inclu                    |                |                                   | .=>            | \$650,   | 000.00        |
| Part 2: Describe Y   | our Vehicles                                  |                                   |                            |                                      |                                       |                |                                   |                |  |               |
| Do you own, lease someone else drive   | -   | -                                 |                            | -                                    | -                                     | -              |                                   | -              | ehicles you o  | wn that       |
| 3. Cars, vans, tr  | ucks, tractors, s                             | sport utility v                   | ehicles, mo                | torcycles                            |                                       |                |                                   |                |  |               |
| ⊠ No<br>□ Yes  |   |                                   |                            |                                      |                                       |                |                                   |                |  |               |

|     | ebtor 1<br>ebtor 2   | Mahadai Bha                                    |   |   | Case number (if known)            |   |
|-----|----------------------|--|---|---|-----------------------------------|---|
|     |                      |  |   | ther recreational vehicles, other ve<br>aft, fishing vessels, snowmobiles, mo |                                   |   |
|     | ⊠ No                 |  |   |   |                                   |   |
|     | ☐ Yes                |  |   |   |                                   |   |
| 5   |                      |  |   | r all of your entries from Part 2, inc<br>number here                         |                                   | \$0.00  |
| Pa  | art 3: Des           | scribe Your Perso                              | onal and Household Items                                    |   |                                   |   |
|     |                      | ·  | ·   | st in any of the following items?   |                                   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6.  | Example No           | old goods and<br>es: Major appliar<br>Describe | furnishings<br>nces, furniture, linens, chir                | na, kitchenware   |                                   |   |
|     |                      |  | household furniture   |   |                                   | \$1,200.00  |
| 7.  | Example  No          | es: Televisions a                              | and radios; audio, video, s<br>I phones, cameras, media     | tereo, and digital equipment; compute<br>players, games                       | ers, printers, scanners; music co | ollections; electronic devices  |
| 8.  | Collecti             | ibles of value<br>es: Antiques and             | l figurines; paintings, print<br>ons, memorabilia, collecti | s, or other artwork; books, pictures, o<br>bles                               | r other art objects; stamp, coin, | or baseball card collections;   |
|     | Yes.                 | Describe                                       |   |   |                                   |   |
| 9.  | Example  No          | musical instr                                  | ographic, exercise, and ot                                  | ner hobby equipment; bicycles, pool t   | ables, golf clubs, skis; canoes a | and kayaks; carpentry tools;  |
| 10  | ∟ Yes.<br>. Firearı  | Describe                                       |   |   |                                   |   |
|     | <i>Examp</i><br>⊠ No |  | s, shotguns, ammunition,                                    | and related equipment   |                                   |   |
| 11. | ☐ No É               | <i>les:</i> Everyday cl                        | othes, furs, leather coats,                                 | designer wear, shoes, accessories   |                                   |   |
|     | ⊠ Yes.               | Describe                                       | Used mens and wom   | nens clothing.  |                                   | \$800.00  |
| 12  | ☐ No É               | •  | welry, costume jewelry, e                                   | ngagement rings, wedding rings, heir  | loom jewelry, watches, gems, g    | old, silver   |
|     |                      |  | Gold jewelry.   |   |                                   | \$1,100.00  |
| 13. | Examp<br>☐ No        | arm animals<br>les: Dogs, cats,                | birds, horses   |   |                                   |   |
|     | ĭ Yes.               | Describe                                       | Shih Tzu  |   |                                   | Unknown   |
| 14. | . Any of             | ther personal a                                | nd household items you                                      | did not already list, including any   | health aids you did not list      |   |

☑ No☑ Yes. Give specific information.....

Official Form 106A/B

|     | btor 1 Krishna Bha<br>btor 2 <u>Mahadai Bh</u>   | agwandeen<br>nagwandeen   |  | Case number (if known)                             |   |
|-----|--|---|--|--|---|
| 15. |  |   | art 3, including any entries for pag   | ges you have attached                              | \$3,100.00  |
| Do  | t de Dooriha Vaur Fina   | annoial Annota  |  |  |   |
|     | you own or have any  | ncial Assets<br>/ legal or equitable interest in  | any of the following?  |  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| -   | □ No   | u have in your wallet, in your ho   | ome, in a safe deposit box, and on ha  | , , ,  |   |
|     |  |   |  | Cash<br>   | \$200.00  |
| ļ   |  |   | ounts; certificates of deposit; shares is with the same institution, list each. Institution name:  | n credit unions, brokerage ho                      | ouses, and other similar  |
|     |  | 17.1. Checking  | Capital One  |  | \$3,000.00  |
| 19. | and joint venture<br>☐ No  | information about them  Name of entity:  Larry's Furniture Inc.   | oorated and unincorporated busing  | esses, including an interest % of ownership: 100 % | in an LLC, partnership,   |
|     |  | ψ1,500 of inventory.  |  |  | Ψ20,000.00  |
| 21. | Negotiable instrumen Non-negotiable instru  No  No  Yes. Give specific ir  Retirement or pensi | ts include personal checks, cas<br>iments are those you cannot tra<br>information about them<br>Issuer name:<br>ion accounts<br>in IRA, ERISA, Keogh, 401(k), 4 | otiable and non-negotiable instrurshiers' checks, promissory notes, and ansfer to someone by signing or delive 403(b), thrift savings accounts, or other lastitution name: | I money orders.<br>ering them.                     | lans  |
| ļ   |  | sed deposits you have made so   | o that you may continue service or us<br>public utilities (electric, gas, water), t<br>Institution name or individual:   | elecommunications companie                         | es, or others   |
|     | ⊠ No   | ct for a periodic payment of mor<br>Issuer name and description.  | ney to you, either for life or for a numb  | ber of years)                                      |   |
|     |  | tion IRA, in an account in a q<br>), 529A(b), and 529(b)(1).  | ualified ABLE program, or under a  | qualified state tuition prog                       | ram.  |

| Yes  | Debtor 1<br>Debtor 2   | Krishna Bhagwan<br>Mahadai Bhagwar            |  | Case number <i>(if known)</i>                    |  |
|--|------------------------|---|--|--|--|
| No   | ☐ Yes                  |   |  |  |  |
| Yes. Give specific information about them  26. Patents, copyrights, trademarks, trade secrets, and other intellectual property   | 25. <b>Trus</b>        | ts, equitable or future                       | interests in property (other than anything                                     | g listed in line 1), and rights or powers exerc  | isable for your benefit                |
| Examples: Internet domain names, websites, proceeds from royalties and licensing agreements   No   Yes. Give specific information about them   |                        | s. Give specific informa                      | tion about them  |  |  |
| Examples: Bullding permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses    No   | <i>Exan</i><br>⊠ No    | nples: Internet domain n                      | ames, websites, proceeds from royalties and                                    |  |  |
| Yes.   Sive specific information about them  | _Exan                  |   |  | holdings, liquor licenses, professional licenses |  |
| Portion you own?   Do not deduct secured claims or exemptions.    28.  |                        | s. Give specific informa                      | tion about them  |  |  |
| No   | Money o                | r property owed to you                        | ?  |  | portion you own? Do not deduct secured |
| Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  No    Yes. Give specific information   | ⊠ No                   | _   | on about them, including whether you alread                                    | dy filed the returns and the tax years           |  |
| Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else    No   | <i>Exan</i><br>⊠ No    | nples: Past due or lump                       |  | t, maintenance, divorce settlement, property set | ttlement                               |
| Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  | <i>Exan</i><br>⊠ No    | nples: Unpaid wages, di<br>benefits; unpaid l | sability insurance payments, disability benef<br>pans you made to someone else | its, sick pay, vacation pay, workers' compensa   | ation, Social Security                 |
| Yes. Name the insurance company of each policy and list its value.   Company name:   Beneficiary:   Surrender or refund value:   \$0.00     Milliam Penn, Term Policy   Daughter   \$0.00     Lincoln Financial, Term Policy   Daughter   \$0.00     Solution   Solution | _Exan                  |   |  | SA); credit, homeowner's, or renter's insurance  |  |
| Milliam Penn, Term Policy   Daughter   \$0.00  | _                      |   |  | Beneficiary:                                     |  |
| 32. Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.  No Yes. Give specific information  33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim  34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim  |                        | _   | William Penn, Term Policy  | Daughter   |  |
| If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.  No Yes. Give specific information  33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim  |                        | -   | Lincoln Financial, Term Policy   | Daughter   | \$0.00                                 |
| Examples: Accidents, employment disputes, insurance claims, or rights to sue  No Yes. Describe each claim  34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim  | If you<br>some<br>⊠ No | u are the beneficiary of a<br>cone has died.  | living trust, expect proceeds from a life insu                                 |  | e property because                     |
| <ul> <li>No</li> <li>Yes. Describe each claim</li> <li>35. Any financial assets you did not already list</li> <li>⋈ No</li> </ul>  | <i>Exan</i><br>⊠ No    | nples: Accidents, employ                      | ment disputes, insurance claims, or rights to                                  |  |  |
| ⊠ No   | ⊠ No                   |   |  | g counterclaims of the debtor and rights to s    | et off claims                          |
|  | ⊠ No                   | •   | •  |  |  |

|      | otor 1<br>otor 2     | Krishna Bhagwandeen<br>Mahadai Bhagwandeen   |                             | Case number (if known)    |                  |
|------|----------------------|--|-----------------------------|---------------------------|------------------|
| 36.  |                      | he dollar value of all of your entries from Part 4, includ<br>art 4. Write that number here  |                             |                           | \$23,200.00      |
| Part | 5: Des               | scribe Any Business-Related Property You Own or Have an Inte   | erest In. List any real est | ate in Part 1.            |                  |
|      |                      | own or have any legal or equitable interest in any business-rel to Part 6.   | ated property?              |                           |                  |
|      | _                    | Go to line 38.   |                             |                           |                  |
| Part |                      | scribe Any Farm- and Commercial Fishing-Related Property Yo<br>ou own or have an interest in farmland, list it in Part 1.            | u Own or Have an Intere     | st In.                    |                  |
| 46.  | ⊠ No. (              | u own or have any legal or equitable interest in any fari<br>Go to Part 7.<br>Go to line 47.   | m- or commercial fish       | ing-related property?     |                  |
| Part | 7:                   | Describe All Property You Own or Have an Interest in That Yo   | ou Did Not List Above       |                           |                  |
| Σ    | <i>Examp</i><br>☑ No | u have other property of any kind you did not already li<br>es: Season tickets, country club membership<br>Give specific information | ist?                        |                           |                  |
| 54.  | Add t                | he dollar value of all of your entries from Part 7. Write t  | hat number here             |                           | \$0.00           |
| Part | 8:                   | List the Totals of Each Part of this Form  |                             |                           |                  |
| 55.  | Part 1               | : Total real estate, line 2  |                             |                           | \$650,000.00     |
| 56.  | Part 2               | : Total vehicles, line 5   | \$0.00                      |                           |                  |
| 57.  | Part 3               | : Total personal and household items, line 15  | \$3,100.00                  |                           |                  |
| 58.  | Part 4               | : Total financial assets, line 36  | \$23,200.00                 |                           |                  |
| 59.  | Part 5               | : Total business-related property, line 45   | \$0.00                      |                           |                  |
| 60.  | Part 6               | : Total farm- and fishing-related property, line 52  | \$0.00                      |                           |                  |
| 61.  | Part 7               | : Total other property not listed, line 54   | +\$0.00                     |                           |                  |
| 62.  | Total                | personal property. Add lines 56 through 61   | \$26,300.00                 | Copy personal property to | otal \$26,300.00 |
| 63.  | Total                | of all property on Schedule A/B. Add line 55 + line 62   |                             |                           | \$676 300 00     |

| _   |                               |  |   |             |   | _            |                         |
|-----|-------------------------------|--|---|-------------|---|--------------|-------------------------|
| Fil | II in this informa            | ation to identify your ca                            | ise:                                    |             |   |              |                         |
| De  | ebtor 1                       | Krishna Bhagwande                                    |   |             |   |              |                         |
| _   |                               | First Name   | Middle Name                             | L           | ast Name  |              |                         |
|     | ebtor 2<br>ouse if, filing)   | Mahadai Bhagwande                                    | Pen Middle Name                         | L           | ast Name  |              |                         |
|     |                               | constant Count for the co                            | EACTEDN DICTRICT OF NE                  | -\^/ \//    | ODK   |              |                         |
| Un  | nited States Bank             | cruptcy Court for the:                               | EASTERN DISTRICT OF NE                  | EVV Y       | URK   |              |                         |
|     | ase number                    |  |   |             |   |              | Check if this is an     |
| (   |                               |  |   |             |   |              | amended filing          |
| Λ.  | fficial Ear                   | m 106C   |   |             |   |              |                         |
|     | <u>fficial For</u>            |  | 4 37 01                                 |             | _ ,   |              |                         |
|     |                               | C: The Pro   | perty You Cla                           | im          | as Exempt   |              |                         |
| 4/2 | 22                            |  |   |             |   |              |                         |
|     |                               |  |   |             | ther, both are equally responsible fo   |              |                         |
|     |                               |  |   |             | our source, list the property that you<br>oge as necessary. On the top of any |              |                         |
| cas | e number (if kno              | wn).   | ,                                       |             |   |              | ,                       |
|     |                               |  |   |             | ount of the exemption you claim.  |              |                         |
|     |                               |  |   |             | ir market value of the property be<br>th aids, rights to receive certain b    |              |                         |
| fun | ds—may be un                  | limited in dollar amoun                              | t. However, if you claim an             | exen        | nption of 100% of fair market valu  | ie under a l | aw that limits the      |
|     |                               | ticular dollar amount a<br>tatutory amount.          | nd the value of the propert             | y is c      | determined to exceed that amoun   | t, your exe  | mption would be limited |
| Pa  | rt 1: Identify                | the Property You Clain                               | n as Exempt                             |             |   |              |                         |
|     |                               |  |   | o if vo     | our angues is filing with you   |              |                         |
| ١.  | _                             |  | ming? Check one only, ever              | •           |   |              |                         |
|     |                               | •  | onbankruptcy exemptions.                | 11 0        | J.S.C. § 522(b)(3)  |              |                         |
|     | _                             | ming federal exemptions                              | • ( ), (                                |             |   |              |                         |
| 2.  |                               |  | <u> </u>                                |             | fill in the information below.  |              |                         |
|     |                               | n of the property and line on at lists this property | on Current value of the portion you own | Amo         | ount of the exemption you claim   | Specific la  | ws that allow exemption |
|     |                               |  | Copy the value from                     | Che         | eck only one box for each exemption.  |              |                         |
|     | 07 22 100th 6                 | Stroot South Diahman                                 | Schedule A/B                            | _           | 4004.000.00   | NVCDLE       | 2 S 5206                |
|     | Hill, NY 1141                 | Street, South Richmor<br>9                           | \$650,000.00                            |             | \$204,800.00  | NYCPLF       | 1 9 5200                |
|     | Queens Cour                   | nty  |   | Ш           | 100% of fair market value, up to any applicable statutory limit               |              |                         |
|     | Line from Sche                | dule A/B: 1.1  |   |             | any applicable statutory limit  |              |                         |
|     | household fur                 | niture   | \$1,200.00                              | $\boxtimes$ | \$1,200.00  | NYCPLF       | R § 5205(a)(5)          |
|     | Line from Sche                | dule A/B: 6.1  | Ψ1,200.00                               |             |   |              |                         |
|     |                               |  |   | _           | 100% of fair market value, up to any applicable statutory limit               |              |                         |
|     |                               |  |   |             |   |              |                         |
|     | Used mens a<br>Line from Sche | nd womens clothing.                                  | \$800.00                                | $\boxtimes$ | \$800.00  | NYCPLF       | ? § 5205(a)(5)          |
|     | Line nom Sche                 | dule AVD. 11.1                                       |   |             | 100% of fair market value, up to  |              |                         |
|     |                               |  |   |             | any applicable statutory limit  |              |                         |
|     | Gold jewelry.                 |  | \$1,100.00                              | $\boxtimes$ | \$1,100.00  | NYCPLF       | R § 5205(a)(6)          |
|     | Line from Sche                | dule A/B: 12.1                                       | Ψ1,100.00                               |             |   |              |                         |
|     |                               |  |   | _           | 100% of fair market value, up to any applicable statutory limit               |              |                         |
|     |                               |  |   |             | • • •   |              |                         |
|     | Cash                          | dula A/D. 16 1                                       | \$200.00                                | $\boxtimes$ | 90%   | NYCPLF       | ? § 5205(d)(2)          |
|     | Line from Sche                | aule A/B: 10.1                                       |   |             | 100% of fair market value, up to  |              |                         |

Official Form 106C

any applicable statutory limit

| Debtor<br>Debtor | * * · · · · · · · · · · · · · · · · · ·   |   | Case number (if known)  |                                    |
|------------------|---|---|---|------------------------------------|
|                  | ief description of the property and line on<br>thedule A/B that lists this property   | Current value of the portion you own  Copy the value from | Amount of the exemption you claim  Check only one box for each exemption. | Specific laws that allow exemption |
|                  |   | Schedule A/B  | Check only one box for each exemption.                                    |                                    |
|                  | apital One<br>ne from <i>Schedule A/B</i> : 17.1  | \$3,000.00  | ⊠90%  | NYCPLR § 5205(d)(2)                |
| LII              | ie Irom Schedule A/B. 17.1  |   | 100% of fair market value, up to any applicable statutory limit           |                                    |
|                  | arry's Furniture Inc.<br>wns 2005 GMC Safari and has  | \$20,000.00   | \$20,000.00   | NYCPLR § 5205(a)(7)                |
|                  | orage unit with \$1,500 of inventory.<br>ne from <i>Schedule A/B</i> : 19.1   |   | ☐ 100% of fair market value, up to any applicable statutory limit         |                                    |
|                  | re you claiming a homestead exemption of ubject to adjustment on 4/01/25 and every 3 No Yes. Did you acquire the property covere No Yes | 3 years after that for ca                                 |   | ,                                  |

| Fill in this informa  | ation to identify you   |   |                |   |  |                             |
|---|---|---|----------------|---|--|-----------------------------|
| Debtor 1  | Krishna Bhagwa  |   | st Name        |   |  |                             |
| Dobtor 2  | Mahadai Bhagw   |   | St Ivallie     |   |  |                             |
| Debtor 2<br>(Spouse if, filing)   | First Name  |   | st Name        |   |  |                             |
| United States Banl  | kruptcy Court for the   | : EASTERN DISTRICT OF NEW YO  | RK             |   |  |                             |
| Case number   |   |   |                |   |  |                             |
| (if known)  |   |   |                |   | _  | if this is an<br>ded filing |
| Official Form   | 106D  |   |                |   |  |                             |
|   |   | Who Have Claims Se  | cured          | by Propert  | v  | 12/15                       |
| needed, copy the Ad known).  1. Do any creditors h  No. Check t   | ditional Page, fill it ou   | this form to the court with your other sch  | form. On the   | e top of any additional                                 | pages, write your name                             |                             |
| Part 1: List All  | Secured Claims  |   |                |   |  |                             |
|   |   | more than one secured claim, list the creditor  |                | Column A  | Column B   | Column C                    |
|   |   | as a particular claim, list the other creditors in ical order according to the creditor's name.   | Part 2. As     | Amount of claim  Do not deduct the value of collateral. | Value of collateral<br>that supports this<br>claim | Unsecured portion If any    |
| 2.1 Caliber Hon   | ne Loans, In  | Describe the property that secures the c  |                | \$103,490.00  | \$650,000.00                                       | \$0.00                      |
| Creditor's Name   |   | 97-22 108th Street, South Richmo  | ond            |   |  |                             |
| 601 Office ( Fort Washir 19034-3275 Number, Street, C  Who owes the deb Debtor 1 only Debtor 2 only Debtor 1 and Deb At least one of the Check if this clai | ngton, PA  City, State & Zip Code  t? Check one.  otor 2 only debtors and another im relates to a | Queens County  As of the date you file, the claim is: Checapply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgor car loan) Statutory lien (such as tax lien, mechanidad Judgment lien from a lawsuit Other (including a right to offset) | gage or secu   | red   |  |                             |
| Date debt was incur   | red <u>2013-03</u>  | Last 4 digits of account number   | 9444           |   |  |                             |
| Add the dollar value  | ue of your entries in C   | Column A on this page. Write that number I  | here:          | \$103,49  | 20.00  |                             |
| If this is the last p   | age of your form, add   | the dollar value totals from all pages.   |                | ·   |  |                             |
| Write that number   | here:   |   |                | \$103,49  | 90.00  |                             |
| Part 2: List Othe   | ers to Be Notified fo   | or a Debt That You Already Listed   |                |   |  |                             |
| trying to collect from  | n you for a debt you o  | oe notified about your bankruptcy for a dek<br>owe to someone else, list the creditor in Pa<br>t you listed in Part 1, list the additional cre<br>nis page.   | irt 1, and the | en list the collection ag                               | gency here. Similarly, if                          | you have more               |
|   | ber, Street, City, State &  | & Zip Code  | On which       | า line in Part 1 did you e                              | nter the creditor? 2.1                             |                             |
| Attn: Banl<br>1525 S Be   | •   |   | Last 4 di      | gits of account number <sub>-</sub>                     | _  |                             |

Official Form 106D

| Fill in   | this inform   | nation to identify your  | case:  |  |  |   |  |
|---|---|--|--|--|--|---|--|
| Dobto   | - 1   | Krishna Bhagwand   | oon  |  |  |   |  |
| Debto   | 1   | First Name   | Middle N   | ame  | Last Name  | <del></del>   |  |
| Dobto   | r 2   |  |  |  |  |   |  |
| Debto<br>(Spouse                                    |   | Mahadai Bhagwan First Name   | Middle N   | ame  | Last Name  | <del></del>   |  |
| ` '   | , 3,  |  |  |  |  |   |  |
| United  | States Bar  | nkruptcy Court for the:  | EASTERN [  | DISTRICT OF NE   | W YORK   |   |  |
| _   |   |  |  |  |  |   |  |
| (if known   | number _  |  |  | _  |  |   | Check if this is an                          |
| (II KIIOWI  | ')  |  |  |  |  |   | amended filing                               |
|   |   |  |  |  |  |   | amonada ming                                 |
| Offic   | ial Form  | n 106E/F   |  |  |  |   |  |
|   |   | /F: Creditors W  | ho Havo  | Uneacura   | d Claime   |   | 12/15  |
|   |   |  |  |  | ITY claims and Part 2 for creditors wi   | U NONDDIODITY II.   |  |
| any exe<br>Schedu<br>Schedu<br>left. Atta<br>name a | cutory control le G: Execut le D: Credito ach the Control nd case num | racts or unexpired leases tory Contracts and Unexpiors Who Have Claims Sectinuation Page to this pagnber (if known). | that could resuired Leases (Or<br>ured by Proper<br>e. If you have r | ult in a claim. Als<br>fficial Form 106G).<br>ty. If more space i<br>no information to r | o list executory contracts on Schedu Do not include any creditors with pa s needed, copy the Part you need, fill eport in a Part, do not file that Part. C | le A/B: Property (Office<br>rtially secured claims<br>it out, number the en | that are listed in tries in the boxes on the |
| Part 1  | List Al   | I of Your PRIORITY Un  | secured Clai   | ms   |  |   |  |
|   | -   | rs have priority unsecure  | d claims agains  | st you?  |  |   |  |
|   | No. Go to Pa  | art 2.   |  |  |  |   |  |
| Ц   | Yes.  |  |  |  |  |   |  |
| Part 2  | l iet ΔI  | l of Your NONPRIORIT   | V Ilnsacurad   | Claims   |  |   |  |
|   |   |  |  |  |  |   |  |
|   | -   | rs have nonpriority unsec  | _  |  |  |   |  |
| Ц   | No. You hav   | re nothing to report in this pa  | art. Submit this f   | orm to the court wit   | h your other schedules.  |   |  |
| $\boxtimes$   | Yes.  |  |  |  |  |   |  |
| un  | secured clain   | n, list the creditor separately  | for each claim.  | For each claim list  | the creditor who holds each claim. If<br>ed, identify what type of claim it is. Do no<br>u have more than three nonpriority unse                           | ot list claims already inc  | cluded in Part 1. If more                    |
| ۷.  |   |  |  |  |  |   | Total claim                                  |
|   | Λ!:-4 \ \Λ  | lim 4  |  |  |  |   | ¢47.500.00                                   |
| 4.1   | Alister W   | VINT<br>Creditor's Name  |  | Last 4 digits of a   | count number   |   | \$17,500.00                                  |
|   | C/O Jes   | se S. Barton, Esq.<br>gal P.C.<br>42nd Street  |  | When was the de  | bt incurred?   |   | -  |
|   | Now Vor   | rk, NY 10165   |  |  |  |   |  |
|   |   | reet City State Zip Code   |  | As of the date vo  | u file, the claim is: Check all that apply   | ,   |  |
|   |   | rred the debt? Check one.  |  | or the date yo   | a, and stann io. Oncon an that apply   |   |  |
|   | ☐ Debtor  |  |  | ☐ Contingent   |  |   |  |
|   | ☐ Debtor  | •  |  | ☐ Unliquidated   |  |   |  |
|   |   | 1 and Debtor 2 only  |  | ☐ Disputed   |  |   |  |
|   |   | one of the debtors and and   | ther   | •  | ORITY unsecured claim:   |   |  |
|   |   | if this claim is for a com   |  | ☐ Student loans  |  |   |  |
|   | debt  |  | -  |  | sing out of a separation agreement or div  | vorce that you did not  |  |
|   | Is the clair  | m subject to offset?   |  | report as priority c   |  | •   |  |
|   | ⊠ No  |  |  |  | on or profit-sharing plans, and other simi   | lar debts   |  |
|   | ☐ Yes   |  |  | $\ensuremath{\boxtimes}$ Other. Specify  | Claim for Compensation   |   | _  |
|   |   |  |  |  |  |   |  |

Official Form 106 E/F

| Debtor |  |  |  |            |
|--------|--|--|--|------------|
| Debtor | 2 Mahadai Bhagwandeen  |  | Case number (if known)                       |            |
| 4.2    | Amex   | Last 4 digits of account number                                | 4123   | \$1,167.00 |
|        | Nonpriority Creditor's Name<br>PO Box 981537<br>El Paso, TX 79998-1537 | When was the debt incurred?                                    | 2021-07                                      |            |
| •      | Number Street City State Zip Code                                      | As of the date you file, the claim                             | is: Check all that apply                     |            |
|        | Who incurred the debt? Check one.                                      | ,,,,   |  |            |
|        | Debtor 1 only  | ☐ Contingent   |  |            |
|        | ☑ Debtor 2 only  | ☐ Unliquidated   |  |            |
|        | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|        | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecure                                   | d claim:                                     |            |
|        | ☐ Check if this claim is for a community                               | ☐ Student loans  |  |            |
|        | debt   | ☐ Obligations arising out of a sepa                            | ration agreement or divorce that you did not |            |
|        | Is the claim subject to offset?  | report as priority claims                                      |  |            |
|        | ⊠ No   | ☐ Debts to pension or profit-sharin                            | • •  |            |
|        | Yes  | ☑ Other. Specify Credit card                                   | purchases                                    |            |
|        |  |  |  |            |
| 4.3    | Amex   | Last 4 digits of account number                                | 7653   | \$719.00   |
|        | Nonpriority Creditor's Name<br>PO Box 981537                           | When was the debt incurred?                                    | 2014-10                                      |            |
|        | El Paso, TX 79998-1537   |  |  |            |
|        | Number Street City State Zip Code                                      | As of the date you file, the claim                             | is: Check all that apply                     |            |
|        | Who incurred the debt? Check one.                                      |  |  |            |
|        | □ Debtor 1 only  | ☐ Contingent   |  |            |
|        | ☐ Debtor 2 only  | ☐ Unliquidated   |  |            |
|        | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |            |
|        | ☐ At least one of the debtors and another                              | Type of NONPRIORITY unsecure                                   | d claim:                                     |            |
|        | ☐ Check if this claim is for a community                               | ☐ Student loans  |  |            |
|        | debt   |  | ration agreement or divorce that you did not |            |
|        | Is the claim subject to offset?  | report as priority claims                                      |  |            |
|        | ⊠ No   | ☐ Debts to pension or profit-sharin                            | · · · · ·                                    |            |
|        | Yes  | ☑ Other. Specify Credit card                                   | purchases                                    |            |
|        |  |  |  |            |
| 4.4    | Capital One  | Last 4 digits of account number                                | 3388   | \$3,954.00 |
|        | Nonpriority Creditor's Name  |  |  |            |
|        | PO Box 31293   | When was the debt incurred?                                    | 2021-05                                      |            |
|        | Salt Lake City, UT 84131-0293  |  |  |            |
|        | Number Street City State Zip Code                                      | As of the date you file, the claim                             | is: Check all that apply                     |            |
|        | Who incurred the debt? Check one.                                      |  |  |            |
|        | Debtor 1 only  | Contingent   |  |            |
|        | ☐ Debtor 2 only  | Unliquidated   |  |            |
|        | Debtor 1 and Debtor 2 only   | Disputed   |  |            |
|        | At least one of the debtors and another                                | Type of NONPRIORITY unsecured                                  | d claim:                                     |            |
|        | ☐ Check if this claim is for a community debt                          | ☐ Student loans  |  |            |
|        | Is the claim subject to offset?  | Obligations arising out of a sepa<br>report as priority claims | ration agreement or divorce that you did not |            |
|        | No No  | ☐ Debts to pension or profit-sharin                            | a plans, and other similar debts             |            |
|        | _  | ☐ Debts to perision or profit-shariff                          | ••   |            |
|        | Yes  | ☑ Otner. Specify Credit Card                                   | puroriases                                   |            |

| Debtor |   |   |  |             |
|--------|---|---|--|-------------|
| Debtor | 2 <u>Mahadai Bhagwandeen</u>                  |   | Case number (if known)                       |             |
| 4.5    | Discover Financial                            | Last 4 digits of account number   | 5475   | \$7,085.00  |
|        | Nonpriority Creditor's Name<br>PO Box 30939   | When was the debt incurred?   | 2022-05                                      |             |
| ,      | Salt Lake City, UT 84130-0939                 |   |  |             |
|        | Number Street City State Zip Code             | As of the date you file, the claim i  | is: Check all that apply                     |             |
|        | Who incurred the debt? Check one.             |   |  |             |
|        | Debtor 1 only                                 | Contingent  |  |             |
|        | Debtor 2 only                                 | Unliquidated  |  |             |
|        | Debtor 1 and Debtor 2 only                    | ☐ Disputed  | A state.                                     |             |
|        | At least one of the debtors and another       | Type of NONPRIORITY unsecured   | d claim:                                     |             |
|        | ☐ Check if this claim is for a community debt | <ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul> | ration agreement or divorce that you did not |             |
|        | Is the claim subject to offset?               | report as priority claims   |  |             |
|        | ⊠ No  | ☐ Debts to pension or profit-sharing  | = :  |             |
|        | Yes   |   | purchases                                    |             |
|        |   |   |  |             |
| 4.6    | Franpo Realty, LLC                            | Last 4 digits of account number   |  | \$54,458.68 |
| 4.0    | Nonpriority Creditor's Name                   | Last 4 digits of account number   | <del></del> -                                | ψοτ,του.σο  |
|        | 42 West 42nd St.                              | When was the debt incurred?   |  |             |
|        | 2nd Floor                                     |   |  |             |
|        | Brooklyn, NY 11212                            |   |  |             |
| •      | Number Street City State Zip Code             | As of the date you file, the claim i  | is: Check all that apply                     |             |
|        | Who incurred the debt? Check one.             |   |  |             |
|        | ☐ Debtor 1 only                               | ☐ Contingent  |  |             |
|        | ☐ Debtor 2 only                               | ☐ Unliquidated  |  |             |
|        | ☐ Debtor 1 and Debtor 2 only                  | ☐ Disputed  |  |             |
|        | ☐ At least one of the debtors and another     | Type of NONPRIORITY unsecured   | d claim:                                     |             |
|        | ☐ Check if this claim is for a community      | ☐ Student loans   |  |             |
|        | debt  | ☐ Obligations arising out of a sepa   | ration agreement or divorce that you did not |             |
|        | Is the claim subject to offset?               | report as priority claims   |  |             |
|        | ⊠ No  | ☐ Debts to pension or profit-sharing  | = :  |             |
|        | Yes   |   | ontract claim                                |             |
|        |   |   |  |             |
| 4.7    | Jpmcb   | Last 4 digits of account number   | 7667   | \$10,217.00 |
|        | Nonpriority Creditor's Name                   |   |  |             |
|        | PO Box 15369                                  | When was the debt incurred?   | 2016-12                                      |             |
|        | Wilmington, DE 19850-5369                     |   |  |             |
| ·      | Number Street City State Zip Code             | As of the date you file, the claim i  | is: Check all that apply                     |             |
|        | Who incurred the debt? Check one.             |   |  |             |
|        | □ Debtor 1 only                               | ☐ Contingent  |  |             |
|        | ☐ Debtor 2 only                               | ☐ Unliquidated  |  |             |
|        | ☐ Debtor 1 and Debtor 2 only                  | ☐ Disputed  |  |             |
|        | ☐ At least one of the debtors and another     | Type of NONPRIORITY unsecured   | d claim:                                     |             |
|        | Check if this claim is for a community        | Student loans   |  |             |
|        | debt  |   | ration agreement or divorce that you did not |             |
|        | Is the claim subject to offset?               | report as priority claims   | a plane, and other similar date.             |             |
|        | ⊠ No<br>—                                     | Debts to pension or profit-sharing  | • •  |             |
|        | Yes   | Other. Specify Credit card  | purchases                                    |             |

|          | 1 Krishna Bhagwandeen<br>2 Mahadai Bhagwandeen   |  | Case number (if known)                                |            |
|----------|--|--|---|------------|
| 4.8      | Jpmcb  | Last 4 digits of account number  | 4148  | \$1,136.00 |
|          | Nonpriority Creditor's Name<br>PO Box 15369<br>Wilmington, DE 19850-5369                       | When was the debt incurred?  | 2014-05   |            |
|          | Number Street City State Zip Code  Who incurred the debt? Check one.                           | As of the date you file, the claim   | is: Check all that apply                              |            |
|          | <ul><li>☑ Debtor 1 only</li><li>☐ Debtor 2 only</li><li>☐ Debtor 1 and Debtor 2 only</li></ul> | ☐ Contingent<br>☐ Unliquidated<br>☑ Disputed   |   |            |
|          | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt        | Type of NONPRIORITY unsecured  ☐ Student loans ☐ Obligations arising out of a sepa         | d claim: ration agreement or divorce that you did not |            |
|          | Is the claim subject to offset?  ☑ No  | report as priority claims  Debts to pension or profit-sharin                               | -   |            |
|          | Yes  | ☐ Other. Specify Credit card   | · · · ·   |            |
| 4.9      | Macy's/ DSNB   | Last 4 digits of account number  | 8810  | \$1,511.00 |
|          | Nonpriority Creditor's Name<br>PO Box 6789<br>Sioux Falls, SD 57117-6789                       | When was the debt incurred?  | 2010-05   |            |
| •        | Number Street City State Zip Code  Who incurred the debt? Check one.                           | As of the date you file, the claim   | is: Check all that apply                              |            |
|          | ☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only                                   | ☐ Contingent ☐ Unliquidated ☑ Disputed   |   |            |
|          | At least one of the debtors and another  Check if this claim is for a community debt           | Type of NONPRIORITY unsecured  ☐ Student loans   |   |            |
|          | Is the claim subject to offset?  | report as priority claims  | ration agreement or divorce that you did not          |            |
|          | ☑ No □ Yes   | <ul><li>□ Debts to pension or profit-sharin</li><li>☑ Other. Specify Credit card</li></ul> | • •   |            |
|          |  | · · · ———  |   |            |
| 4.1<br>0 | Nordstrom FSB<br>Nonpriority Creditor's Name   | Last 4 digits of account number  | 9735  | \$2,343.00 |
|          | 13531 E Caley Ave<br>Englewood, CO 80111-6504  | When was the debt incurred?  | 2021-08   |            |
| •        | Number Street City State Zip Code  Who incurred the debt? Check one.                           | As of the date you file, the claim   | is: Check all that apply                              |            |
|          | ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only                                   | ☐ Contingent<br>☐ Unliquidated<br>☑ Disputed   |   |            |
|          | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt        | Type of NONPRIORITY unsecured  ☐ Student loans  ☐ Obligations arising out of a sepa        | d claim: ration agreement or divorce that you did not |            |
|          | Is the claim subject to offset?  ☑ No  | report as priority claims  Debts to pension or profit-sharin                               | · ·   |            |
|          | ☐ Yes  | ☐ Other. Specify Credit card   |   |            |

|                | r 1 Krishna Bhagwandeen<br>r 2 <u>Mahadai Bhagwandeen</u> | Case number (if known)  |                           |
|----------------|---|---|---------------------------|
| 4.1            | Regina Felton   | Last 4 digits of account number   | Unknown                   |
| ليا            | Nonpriority Creditor's Name                               | Last 4 digits of account number   | Onknown                   |
|                | Felton & Associates                                       | When was the debt incurred?   | _                         |
|                | 1371 Fulton Street  |   |                           |
|                | Brooklyn, NY 11216  |   |                           |
|                | Number Street City State Zip Code                         | As of the date you file, the claim is: Check all that apply   |                           |
|                | Who incurred the debt? Check one.                         | Continued.  |                           |
|                | ☐ Debtor 1 only ☐ Debtor 2 only                           | ☐ Contingent<br>☐ Unliquidated  |                           |
|                | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only              | ☐ Offiniquidated  |                           |
|                | ☐ At least one of the debtors and another                 | Type of NONPRIORITY unsecured claim:  |                           |
|                | ☐ Check if this claim is for a community                  | ☐ Student loans   |                           |
|                | debt  | ☐ Obligations arising out of a separation agreement or divorce that you did not   |                           |
|                | Is the claim subject to offset?                           | report as priority claims   |                           |
|                | ⊠ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts   |                           |
|                | Yes   | ☑ Other. Specify Legal Fees and Costs   | -                         |
| 4.1            | Varizan Wirologo  | 0004  | \$1,133.00                |
| 2              | Verizon Wireless Nonpriority Creditor's Name              | Last 4 digits of account number   | φ1,133.00                 |
|                |   | When was the debt incurred? 2023-09   | _                         |
|                | Minneapolis, MN 55426                                     | As of the date vary file the claim in Check all that analy  | •                         |
|                | Number Street City State Zip Code                         | As of the date you file, the claim is: Check all that apply   |                           |
|                | Who incurred the debt? Check one.  ☑ Debtor 1 only        | ☐ Contingent  |                           |
|                | ☐ Debtor 2 only   | ☐ Unliquidated  |                           |
|                | ☐ Debtor 1 and Debtor 2 only                              | ☑ Disputed  |                           |
|                | ☐ At least one of the debtors and another                 | Type of NONPRIORITY unsecured claim:  |                           |
|                | ☐ Check if this claim is for a community                  | ☐ Student loans   |                           |
|                | debt  | ☐ Obligations arising out of a separation agreement or divorce that you did not   |                           |
|                | Is the claim subject to offset? ☑ No                      | report as priority claims   |                           |
|                | <del>_</del>  | ☐ Debts to pension or profit-sharing plans, and other similar debts   |                           |
|                | Yes   | ☑ Other. Specify <u>Utilities</u>   | -                         |
| Part 3         | List Others to Be Notified About a D                      | ebt That You Already Listed   |                           |
| is try<br>have | ring to collect from you for a debt you owe to s          | about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For exampsomeone else, list the original creditor in Parts 1 or 2, then list the collection agency hat you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional creditors here. | y here. Similarly, if you |
|                | and Address   | On which entry in Part 1 or Part 2 did you list the original creditor?  |                           |
|                | n Sackowitz   | Line 4.6 of (Check one):  | ms                        |
| Katz I         | Melinger PLLC   | Part 2: Creditors with Nonpriority Unsecured  | Claims                    |
|                | Madison Ave., Suite 600                                   |   |                           |
| New `          | York, NY 10016  | Last 4 digits of account number   |                           |
|                |   | Last 4 digits of account number   |                           |
|                | and Address   | On which entry in Part 1 or Part 2 did you list the original creditor?  | ·                         |
| Amex           |   | Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Cla ☐ Part 2: Creditors with Nonpriority Unsecured   |                           |
|                | espondence/Bankruptcy<br>ox 981535                        |   |                           |
| _              | so, TX 79998-1535   |   |                           |
| Liiu           | 56, 17, 76666 1666  | Last 4 digits of account number   |                           |
| Name a         | and Address   | On which entry in Part 1 or Part 2 did you list the original creditor?  |                           |
| Amex           | (   | Line 4.3 of (Check one):  |                           |
|                | espondence/Bankruptcy                                     | Part 2: Creditors with Nonpriority Unsecured  | Cialitis                  |
|                | ox 981535   |   |                           |
| ⊵i Pa          | so, TX 79998-1535   | Last 4 digits of account number   |                           |
| Name :         | and Address   | On which entry in Part 1 or Part 2 did you list the original creditor?  |                           |
|                | al One  | Line 4.4 of (Check one):  |                           |
|                | Bankruptcy  | Part 2: Creditors with Nonpriority Unsecured  | Cialms                    |
|                | ox 30285  |   |                           |
| Salt L         | ake City, UT 84130-0285                                   |   |                           |

Official Form 106 E/F

| Debtor 1 Krishna Bhagwandeen Debtor 2 Mahadai Bhagwandeen   | Case number (if known)  |
|---|---|
|   | Last 4 digits of account number   |
| Name and Address Discover Financial Attn: Bankruptcy PO Box 3025 New Albany, OH 43054-3025                | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.5 of (Check one):  |
| 110W 7 HBany, 011 1000 1 0020   | Last 4 digits of account number   |
| Name and Address Jpmcb MailCode LA4-7100 700 Kansas Ln Monroe, LA 71203-4774                              | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.7 of (Check one):  |
| WOII 06, LA 1 1203-4114   | Last 4 digits of account number   |
| Name and Address<br>Jpmcb<br>MailCode LA4-7100<br>700 Kansas Ln<br>Monroe, LA 71203-4774                  | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.8 of (Check one):  |
| WOIIIOC, EA 7 1200-4774   | Last 4 digits of account number   |
| Name and Address Macy's/ DSNB Atytn: Bankruptcy 701 E 60th St N Sioux Falls, SD 57104-0432                | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.9 of (Check one):  |
| Gloux 1 alls, GD 37 104-0432  | Last 4 digits of account number   |
| Name and Address Nordstrom FSB ATTN: Bankruptcy PO Box 6555 Englewood, CO 80155-6555                      | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.10 of (Check one):   |
| Englewood, CO 80133-0333  | Last 4 digits of account number   |
| Name and Address Verizon Wireless Attn: Bankruptcy 500 Technology Dr Ste 599 Weldon Spring, MO 63304-2225 | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |
| , 0,  | Last 4 digits of account number   |

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                          |     |   |     | Total Claim      |
|--------------------------|-----|---|-----|------------------|
|                          | 6a. | Domestic support obligations  | 6a. | \$<br>0.00       |
| Total claims from Part 1 | Ch  | Toyon and contain other debte you are the government  | Ch  | 0.00             |
| Irom Part 1              | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00       |
|                          | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00       |
|                          | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00       |
|                          | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00       |
|                          |     |   |     | Total Claim      |
|                          | 6f. | Student loans   | 6f. | \$<br>0.00       |
| Total claims             |     |   |     |                  |
| from Part 2              | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00       |
|                          | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00       |
|                          | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>101,223.68 |

Official Form 106 E/F

| Krishna Bhagwandeen<br>Mahadai Bhagwandeen             | Case number (if known) |            |
|--|------------------------|------------|
| 6j. <b>Total Nonpriority.</b> Add lines 6f through 6i. | 6j. \$                 | 101,223.68 |

| Debto            | or 1                     | Krishna Bhagwan                                   | deen               |                       |  |  |
|------------------|--------------------------|---|--------------------|-----------------------|--|--|
| Debto            | or 2                     | First Name<br>Mahadai Bhagwai                     | Middle Name        | La                    | st Name  |  |
|                  | e if, filing)            | First Name  | Middle Name        | La                    | st Name  |  |
| United           | d States B               | ankruptcy Court for the:                          | EASTERN DIS        | TRICT OF NEW YO       | PRK  |  |
| Case<br>(if know | number<br><sup>(n)</sup> |   |                    |                       |  | ☐ Check if this is an  |
|                  |                          |   |                    |                       |  | amended filing   |
|                  |                          |   |                    |                       |  |  |
|                  |                          | orm 106G  | •                  |                       |  |  |
|                  |                          |   |                    |                       | xpired Leases  | 12/15  |
| inform           | nation. If n             |   | opy the addition   | al page, fill it out, | together, both are equally responumber the entries, and attach in  |  |
| 1. D             | o vou hav                | ve any executory contra                           | acts or unexpired  | leases?               |  |  |
| $\triangleright$ | 🛚 Ño. Che                | ck this box and file this fo                      | orm with the court | with your other sche  | edules. You have nothing else to e listed on Schedule A/B:Property |  |
|                  | _                        |   |                    |                       | , ,  | ,  |
|                  |                          |   |                    |                       |  | each contract or lease is for (for one examples of executory contracts |
| a                | nd unexpir               | red leases.                                       |                    |                       |  |  |
| ı                | Person or                | company with whom y<br>Name, Number, Street, City |                    | ract or lease         | State what the contract or lease                                   | e is for   |
| 2.1              |                          |   |                    |                       |  |  |
|                  | Name                     |   |                    |                       |  |  |
|                  | Number                   | Street  |                    |                       |  |  |
|                  | City                     |   | State              | ZIP Code              |  |  |
| 2.2              | City                     |   | State              | ZIF Code              |  |  |
|                  | Name                     |   |                    |                       |  |  |
|                  | Number                   | Street  |                    |                       |  |  |
|                  | City                     |   | State              | ZIP Code              |  |  |
| 2.3              | Name                     |   |                    |                       |  |  |
|                  | INAILIE                  |   |                    |                       |  |  |
|                  | Number                   | Street  |                    |                       |  |  |
|                  | City                     |   | State              | ZIP Code              |  |  |
| 2.4              |                          |   |                    |                       |  |  |
|                  | Name                     |   |                    |                       |  |  |
|                  | Number                   | Street  |                    |                       |  |  |
|                  | City                     |   | State              | ZIP Code              |  |  |
| 2.5              | Oity                     |   | State              | Zii Code              |  |  |
|                  | Name                     |   |                    |                       |  |  |
|                  | Number                   | Street  |                    |                       |  |  |
|                  | City                     |   | State              | 7IP Code              |  |  |
|                  |                          |   |                    |                       |  |  |

Official Form 106G

Fill in this information to identify your case:

|                           |  |   |  |   | _   |
|---------------------------|--|---|--|---|---|
| Fill in thi               | s information to identify you                                    | ur case:  |  |   |   |
| Debtor 1                  | Krishna Bhagwa   | ndeen   |  |   |   |
|                           | First Name   | Middle Name   | Last Name  |   |   |
| Debtor 2<br>(Spouse if, f | Mahadai Bhagw  | andeen Middle Name                                      | Last Name  |   |   |
| (Opouse II, I             | mig) First Name  | Wilddie Warrie  | Last Name  |   |   |
| United St                 | ates Bankruptcy Court for the                                    | EASTERN DISTRICT  | OF NEW YORK  |   |   |
| Case nur                  | nber   |   |  |   |   |
| (if known)                |  |   |  |   | Check if this is an amended filing  |
|                           |  |   |  |   | amended ming  |
| Officia                   | al Form 106H   |   |  |   |   |
| Sche                      | dule H: Your Co  | debtors   |  |   | 12/15   |
|                           |  |   |  |   |   |
| people ar<br>fill it out, | e filing together, both are ed                                   | qually responsible for su<br>ne boxes on the left. Atta | pplying correct information the Additional Page to | on. If more space is                          | rate as possible. If two married<br>needed, copy the Additional Page,<br>op of any Additional Pages, write        |
| 1. Do                     | you have any codebtors?  | If you are filing a joint cas                           | e, do not list either spouse                       | as a codebtor.                                |   |
| ⊠ No<br>□ Ye              |  |   |  |   |   |
|                           | thin the last 8 years, have y<br>na, California, Idaho, Louisiar |   |  |   | rty states and territories include<br>.)  |
| _                         | o. Go to line 3.<br>es. Did your spouse, former sp               | oouse, or legal equivalent                              | live with you at the time?                         |   |   |
| in lin<br>Forn            | e 2 again as a codebtor onl                                      | y if that person is a guar                              | antor or cosigner. Make s                          | ure you have listed                           | ng with you. List the person shown<br>the creditor on Schedule D (Officia<br>, Schedule E/F, or Schedule G to fil |
|                           | Column 1: Your codebtor<br>Name, Number, Street, City, State and | I ZIP Code  |  | Column 2: The cr<br>Check all schedu          | reditor to whom you owe the debt les that apply:  |
| 24                        |  |   |  | □ Sabadula D. li                              | 200   |
| 3.1                       | Name   |   |  | _   |   |
|                           |  |   |  | Schedule G, li                                | ne  |
|                           | Number Street  |   |  | -   |   |
|                           | City   | State   | ZIP Code   |   |   |
| 3.2                       |  |   |  | Schedule D, li                                | na  |
| [J.Z]                     | Name   |   |  | Schedule B, ii  Schedule E/F,  Schedule G, li | line  |
|                           | Number Street  |   |  | -   |   |
|                           | City   | State   | ZIP Code   |   |   |

| Official Form 106  Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally resp supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information absorbed in this form. On the top of any additional pages, write your name and case number (If known). Answer extracts a sperate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer extracts a separate sheet to this form.  Debtor 1  Debtor 2 or non-filing spouse tatch a separate page with information about additional employers.  Occupation  If you have more than one job, attach a separate page with information about additional employers.  Occupation  Self Employed  Self  |   |   |
|---|---|---|
| United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK    Case number   Check if this is:   An amended filing   A supplement showing postpetic   An supplement showing postpetic   An amended filing   A supplement showing postpetic   An amended filing   A supplement showing postpetic   An amended filing   An supplement showing postpetic   An amended filing   An amended fi  | en  |   |
| Case number (If known)    An amended filing   | een   |   |
| Official Form 106I Schedule I: Your Income Bo as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally resp supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information at spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer extends the separate sheet or this form.  Debtor 1 Debtor 1 Debtor 2 or non-filing spouse information about your spouse. If more space information about additional pages, write your name and case number (if known). Answer extends the separate page with information about additional employers.  Occupation If you have more than one job, attach a separate page with information about additional employers.  Occupation Occupation Occupation Occupation Occupation may include student or homemaker, if it applies.  Employer's address  How long employed there?  7 years  7 years  Part 2:  Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your nunless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 1 For Debtor 2 or non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.   | TERN DISTRICT OF NEW YORK   |   |
| Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally response purplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information as spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer expected that a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer expected that a separate beginning to the poor of any additional pages, write your name and case number (If known). Answer expected that a separate beginning to the poor of any additional pages, write your name and case number (If known). Answer expected that a separate beginning to the poor of any additional pages, write your name and case number (If known). Answer expected that a separate beginning to the poor of any additional pages, write your name and case number (If known). Answer expected that a separate beginning that   |   | _   |
| Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally response purplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information as spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer expected that a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer expected that a separate beginning to the poor of any additional pages, write your name and case number (If known). Answer expected that a separate beginning to the poor of any additional pages, write your name and case number (If known). Answer expected that a separate beginning to the poor of any additional pages, write your name and case number (If known). Answer expected that a separate beginning to the poor of any additional pages, write your name and case number (If known). Answer expected that a separate beginning that   |   | MM / DD/ YYYY   |
| supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information at spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer expected the provided information about your spouse. If more space attach a separate page with information about additional employers.  If you have more than one job, attach a separate page with information about additional employers.  Occupation  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's name  Employer's name  Employer's address  Fart 2:  Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your nounless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse with the monthly wage would be.  2. \$ 1,950.00 \$ 1,950.   |   | 12/1:   |
| If you have more than one job, attach a separate page with information about additional employers.    Include part-time, seasonal, or self-employed work.   Cocupation   Cocupation   Cocupation may include student or homemaker, if it applies.   Employer's name   Larry's Furniture Inc.   Larry's  | ried and not filing jointly, and your spouse is livin<br>e is not filing with you, do not include information | with you, include information about your pout your spouse. If more space is needed, |
| attach a separate page with information about additional employers.  Occupation  Self Employed  Self Employed  Self Employed  Self Employed  Larrry's Furniture Inc.  Cocupation may include student or homemaker, if it applies.  Employer's address  How long employed there? 7 years 7 years  Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your not unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse have more than one employer, some more space, attach a separate sheet to this form.  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,950.00 \$ 1,950.  List monthly overtime pay. 3. +\$ 0.00 +\$ 0.  | Debtor 1  | Debtor 2 or non-filing spouse   |
| Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  How long employed there?  Tyears  Tyears  Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your not unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 1,950.00 \$ 1,950.00 \$ 0.00 | ☐ Not employed  | _ , ,   |
| Occupation may include student or homemaker, if it applies.  How long employed there?  7 years  7 years  Tyears  For Debtor 1  For Debtor 2 or non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be.  Employer's name  Larry's Furniture Inc.  A years  7 years  7 years  For Debtor 1 on the space. Include your not all employers for that person on the lines below more space, attach a separate sheet to this form.  For Debtor 1 on-filing spouse and commissions (before all payroll 2. \$ 1,950.00 \$ 1,950.00 \$ 1,950.00 \$ 0.        |   | Self Employed   |
| How long employed there?  Tyears  7 years  Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your not unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 1,950.00 \$ 1,950.  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ 0.   | oyer's name Larry's Furniture Inc.  | Larry's Furniture Inc.  |
| Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your not unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 1,950.00 \$ 1,950.  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ 0.  | oyer's address  |   |
| Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your not unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spous  List monthly gross wages, salary, and commissions (before all payroll  2. deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 1,950.00 \$ 1,950.  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ 0.  |   | 7 years   |
| If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 1,950.00 \$ 1,950.  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ 0.   |   | te \$0 in the space. Include your non-filing spour                                  |
| List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 1,950.00 \$ 1,950.  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ 0.   |   |   |
| List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 1,950.00 \$ 1,950.  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ 0.   |   | for that person on the lines below. If you need                                     |
| <ol> <li>deductions). If not paid monthly, calculate what the monthly wage would be.</li> <li>\$ 1,950.00 \$ 1,950.</li> <li>Estimate and list monthly overtime pay.</li> <li>\$ 0.00 +\$ 0.</li> </ol>   | F   | Debtor 1 For Debtor 2 or non-filing spouse  |
|   |   | 1,950.00 \$ 1,950.00  |
| 4. Calculate gross Income. Add line 2 + line 3. 4. \$ 1,950.00 \$ 1,950.00  | 3. <u>+\$</u>   | 0.00 +\$ 0.00   |
|   | e 3. 4. \$  | \$ <u>1,950.00</u>  |

Official Form 106I Schedule I: Your Income page 1

| Debi | tor 1<br>tor 2 | Krishna Bhagwandeen<br>Mahadai Bhagwandeen  |            | Case r     | number ( <i>if known</i> ) |                    |                      |                   |
|------|----------------|---|------------|------------|----------------------------|--------------------|----------------------|-------------------|
|      |                |   | -          |            | ,                          |                    |                      | _                 |
|      |                |   |            | For        | Debtor 1                   | For Debt           | tor 2 or<br>g spouse |                   |
|      | Cop            | y line 4 here   | 4.         | \$         | 1,950.00                   | \$                 | 1,950.00             | <del>-</del><br>- |
| 5.   | List           | all payroll deductions:   |            |            |                            |                    |                      |                   |
|      | 5a.            | Tax, Medicare, and Social Security deductions   | 5a.        | \$         | 0.00                       | \$                 | 0.00                 | _                 |
|      | 5b.            | Mandatory contributions for retirement plans  | 5b.        | \$         | 0.00                       | \$                 | 0.00                 | _                 |
|      | 5c.            | Voluntary contributions for retirement plans  | 5c.        | \$         | 0.00                       | \$                 | 0.00                 | _                 |
|      | 5d.            | Required repayments of retirement fund loans  | 5d.        | \$         | 0.00                       | \$                 | 0.00                 |                   |
|      | 5e.            | Insurance   | 5e.        | \$         | 0.00                       | \$                 | 0.00                 | _                 |
|      | 5f.            | Domestic support obligations  | 5f.        | \$         | 0.00                       | \$                 | 0.00                 | _                 |
|      | 5g.            | Union dues  | 5g.        | \$         | 0.00                       | \$                 | 0.00                 | _                 |
|      | 5h.            | Other deductions. Specify:  | 5h.+       | \$         | 0.00                       | + \$               | 0.00                 | _                 |
| 6.   | Add            | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.         | \$         | 0.00                       | \$                 | 0.00                 | -                 |
| 7.   | Cald           | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.         | \$         | 1,950.00                   | \$                 | 1,950.00             | _                 |
| 8.   | List<br>8a.    | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.         | 8a.        | \$         | 0.00                       | \$                 | 0.00                 |                   |
|      | 8b.            | Interest and dividends  | 8b.        | <u>*</u> — | 0.00                       | \$                 | 0.00                 | _                 |
|      | 8c.            | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  |            | \$         | 0.00                       | \$                 | 0.00                 | _                 |
|      | 8d.            | Unemployment compensation   | 8d.        | \$         | 0.00                       | \$                 | 0.00                 | _                 |
|      | 8e.<br>8f.     | Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: | 8e.<br>8f. | \$         | 0.00                       | \$<br>\$           | 0.00                 | -                 |
|      | 8g.            | Pension or retirement income  | _ 8g.      | Ψ—<br>\$   | 0.00                       | \$                 | 0.00                 | _                 |
|      | 8h.            | Other monthly income. Specify:  | 8h.+       | \$<br>     | 0.00                       |                    | 0.00                 | _                 |
| 9.   |                | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.         | \$         | 0.00                       | \$                 | 0.0                  | -<br> -           |
| 10.  |                | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10. \$     | 1          | ,950.00 + \$_              | 1,950.0            | 00 = \$ _            | 3,900.00          |
| 11.  | Inclu<br>othe  | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not scify:                | depend     |            | •                          | ed in <i>Sched</i> | dule J.<br>1. +\$    | 0.00              |
| 12.  |                | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies   |            |            | •                          |                    | Combi                |                   |
| 13.  | Do             | you expect an increase or decrease within the year after you file this form   | ?          |            |                            |                    | monthi               | y income          |
|      | $\boxtimes$    | No  |            |            |                            |                    |                      |                   |
|      |                | Yes. Explain:   |            |            |                            |                    |                      |                   |

Official Form 106I Schedule I: Your Income page 2

| Fill                       | in this information to identify your case:   |                                       |            |  |                               |
|----------------------------|--|---------------------------------------|------------|--|-------------------------------|
| Deb                        | tor 1 Krishna Bhagwandeen  |                                       | Ch         | eck if this is:  |                               |
| l                          | otor 2 Mahadai Bhagwandeen   |                                       |            | An amended filing<br>A supplement sho<br>expenses as of th | owing postpetition chapter 13 |
|                            | ed States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YO   | DRK                                   |            | MM / DD / YYYY   |                               |
|                            | e numbernown)  |                                       |            |  |                               |
|                            |  |                                       |            |  |                               |
|                            | fficial Form 106J  |                                       |            |  |                               |
| Be<br>info                 | chedule J: Your Expenses as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this for known). Answer every question.   |                                       |            |  |                               |
| Par                        |  |                                       |            |  |                               |
| 1.                         | Is this a joint case?  ☐ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? ☐ No   |                                       |            |  |                               |
| 0                          | Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i> in   | for Separate Housel                   | hold of De | ebtor 2.   |                               |
| 2.                         | Do you have dependents?  | Dependent's relation                  |            | Dependent's age  | Does dependent live with you? |
|                            | Do not state the dependents names.   |                                       |            |  | □ No<br>□ Yes                 |
|                            |  |                                       |            | _  | ☐ No<br>☐ Yes                 |
|                            |  |                                       |            |  | ☐ No<br>☐ Yes                 |
| _                          | 57.11  |                                       |            |  | ☐ No<br>☐ Yes                 |
| 3.                         | Do your expenses include ⊠ No expenses of people other than □ Yes yourself and your dependents?  |                                       |            |  |                               |
| exp<br>app<br>Incl<br>valu | Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a suppliciable date.  Induce expenses paid for with non-cash government assistance if your of such assistance and have included it on Schedule I: Your inficial Form 1061.) | lemental <i>Schedule</i> you know the | orm as a s | supplement in a CI<br>the box at the top<br>Your ex        | of the form and fill in the   |
| 4.                         | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.  | iclude first mortgage                 | 4.         | \$   | 1,452.00                      |
|                            | If not included in line 4:   |                                       |            |  |                               |
|                            | 4a. Real estate taxes  |                                       | 4a.        | \$   | 0.00                          |
|                            | 4b. Property, homeowner's, or renter's insurance   |                                       | 4b.        | Φ  | 0.00                          |
|                            | Home maintenance, repair, and upkeep expenses     Homeowner's association or condominium dues  |                                       | 4c.<br>4d. | ¢  | 0.00                          |
| 5.                         | Additional mortgage payments for your residence, such as home  | me equity loans                       | 4u.<br>5.  | · <del></del>  | 0.00                          |
| 6.                         | Utilities:   |                                       |            |  |                               |
|                            | 6a. Electricity, heat, natural gas   |                                       | 6a.        |  | 170.00                        |
|                            | <ul><li>6b. Water, sewer, garbage collection</li><li>6c. Telephone, cell phone, Internet, satellite, and cable services</li></ul>  |                                       | 6b.        |  | 400.00                        |
|                            | 6d. Other. Specify:  |                                       | 6c.<br>6d. |  | 0.00                          |

| Debtor 1       |  | Bhagwandeen<br>Bhagwandeen   | Case num       | ber (if known) |                          |
|----------------|--|--|----------------|----------------|--------------------------|
|                |  |  | Outo num       |                |                          |
| 7. <b>Fo</b>   | od and house                               | ekeeping supplies  | 7.             | \$             |                          |
| 8. <b>Chi</b>  | Idcare and c                               | hildren's education costs  | 8.             | \$             | 0.00                     |
|                | •  | ry, and dry cleaning   | 9.             |                | 150.00                   |
| 10. <b>Per</b> | sonal care p                               | roducts and services   | 10.            | \$             |                          |
| 11. <b>Me</b>  | dical and de                               | ntal expenses  | 11.            | \$             | 51.00                    |
|                |  | Include gas, maintenance, bus or train fare.   |                | _              | 05.00                    |
|                | not include ca                             |  | 12.            |                |                          |
|                |  | clubs, recreation, newspapers, magazines, and books  | 13.            | · <del></del>  | 0.00                     |
|                |  | ributions and religious donations  | 14.            | \$             | 0.00                     |
|                |  | surance deducted from your pay or included in lines 4 or 20.   | 15a.           | ¢              | 0.00                     |
|                | . Health ins                               |  | 15a.<br>15b.   | <b>.</b>       | 0.00                     |
|                | . Vehicle ins                              |  |                | · <del></del>  |                          |
|                |  | rance. Specify:  | 15c.           | · ———          | 0.00                     |
|                |  | clude taxes deducted from your pay or included in lines 4 or 20  | 15d.           | <b>&gt;</b>    | 0.00                     |
| Spe            | ecify:                                     |  | 10             | \$             | 0.00                     |
|                |  | ease payments:<br>ents for Vehicle 1   | 47-            | Φ.             | 0.00                     |
|                |  |  | 17a.           |                | 0.00                     |
|                | c. Other. Spe                              | ents for Vehicle 2   | 17b.           |                | 0.00                     |
|                | l. Other. Spe                              |  | 17c.           | · -            | 0.00                     |
|                |  | of alimony, maintenance, and support that you did not rep  | 17d.           | \$             | 0.00                     |
|                |  | your pay on line 5, <i>Schedule I, Your Incom</i> e (Official Form 1   |                | \$             | 0.00                     |
|                |  | s you make to support others who do not live with you.   |                | \$             | 0.00                     |
| Spe            | ecify.                                     |  | 19.            |                |                          |
| 20. Oth        | er real prop                               | erty expenses not included in lines 4 or 5 of this form or on  | Schedule I: Yo | our Income.    |                          |
| 20a            | i. Mortgages                               | on other property  | 20a.           | \$             | 0.00                     |
| 20b            | . Real estat                               | e taxes  | 20b.           | \$             | 0.00                     |
| 200            | . Property, I                              | nomeowner's, or renter's insurance   | 20c.           | \$             | 0.00                     |
| 200            | l. Maintenan                               | ce, repair, and upkeep expenses  | 20d.           | \$             | 0.00                     |
| 20€            | e. Homeown                                 | er's association or condominium dues   | 20e.           | \$             | 0.00                     |
| 21. <b>Oth</b> | er: Specify:                               |  | 21.            | +\$            | 0.00                     |
|                |  | monthly expenses   |                |                |                          |
| 22a            | . Add lines 4                              | through 21.  |                | \$             | 3,000.00                 |
| 22b            | . Copy line 2                              | 2 (monthly expenses for Debtor 2), if any, from Official Form 10   | 6J-2           | \$             |                          |
| 220            | . Add line 22a                             | a and 22b. The result is your monthly expenses.  |                | \$             | 3,000.00                 |
| 23. Cal        | culate your i                              | monthly net income.  |                |                |                          |
| 23a            | i. Copy line                               | 12 (your combined monthly income) from Schedule I.   | 23a.           | \$             | 3,900.00                 |
| 23b            | . Copy your                                | monthly expenses from line 22c above.  | 23b.           | -\$            | 3,000.00                 |
| 230            | . Subtract y                               | our monthly expenses from your monthly income.   |                |                |                          |
|                | The result                                 | is your monthly net income.  | 23c.           | \$             | 900.00                   |
| For<br>mod     | example, do yo<br>lification to the<br>No. | an increase or decrease in your expenses within the year at ou expect to finish paying for your car loan within the year or do you expeterms of your mortgage? |                |                | or decrease because of a |
|                | Yes.                                       | Explain here:  |                |                |                          |

| Fill in this inform   | ation to identify your                        | case:                  |                 |            |                                    |  |       |
|-----------------------|---|------------------------|-----------------|------------|------------------------------------|--|-------|
| Debtor 1              | Krishna Bhagwand                              |                        |                 |            |                                    |  |       |
| Debtor 2              | Mahadai Bhagwar                               | Middle Name<br>ndeen   | La              | ast Name   |                                    |  |       |
| (Spouse if, filing)   | First Name                                    | Middle Name            | La              | ast Name   | _                                  |  |       |
| United States Ban     | kruptcy Court for the:                        | EASTERN DISTRIC        | CT OF NEW YO    | ORK        |                                    |  |       |
| Case number(if known) |   |                        |                 |            |                                    | Check if this is an amended filing                                     | 1     |
| Official Form         |   |                        | al Dabi         |            | Calaadudaa                         |  |       |
| Declarati             | on About a                                    | <u>an inaiviau</u>     | ai Debi         | ors        | <u>Schedules</u>                   |  | 12/15 |
| years, or both. 18    | U.S.C. §§ 152, 1341, 7                        |                        | оапктирісу са   | se can re  | suit in imes up to \$25            | 0,000, or imprisonment for up  | 10 20 |
| Did you pay           | or agree to pay some                          | one who is NOT an a    | attorney to hel | p you fill | out bankruptcy forms               | ?  |       |
| ⊠ No                  |   |                        |                 |            |                                    |  |       |
| ☐ Yes. N              | lame of person                                |                        |                 |            |                                    | Bankruptcy Petition Preparer's N<br>tion, and Signature (Official Forr |       |
|                       | ry of perjury, I declare<br>true and correct. | that I have read the s | summary and     | schedule   | es filed with this decla           | ration and   |       |
| X /s/ Krish           | na Bhagwandeen                                |                        | x               | /s/ Mal    | hadai Bahagwandeer                 | 1  |       |
|                       | Bhagwandeen<br>e of Debtor 1                  |                        |                 |            | lai Bhagwandeen<br>ire of Debtor 2 |  |       |
| DateF                 | ebruary 21, 2025                              |                        |                 | Date _     | February 21, 2025                  |  |       |
|                       |   |                        |                 |            |                                    |  |       |

Official Form 106Dec

| Fil   | I in this information to identify you  | r case:  |   |  |   |
|---|--|--|---|--|---|
| Debtor 1 Krishna Bhagwar  |  | ideen  |   |  |   |
|   |  | Middle Name  | Last Name   |  |   |
|   | ebtor 2 Mahadai Bhagwa<br>ouse if, filing) First Name  | ndeen Middle Name  | Last Name   |  |   |
| Ur  | nited States Bankruptcy Court for the:   | EASTERN DISTRICT OF  | NEW YORK  |  |   |
|   |  | ENOTE IN BIOTHOT OF  | NEW FORK  |  |   |
| _   | nown)  |  |   |  | Check if this is an mended filing                     |
|   | fficial Form 107<br>atement of Financial   | Affairs for Individ  | luals Filing for B                                    | ankruptcy                                  | 04/22   |
| info  | as complete and accurate as possi<br>ormation. If more space is needed<br>nber (if known). Answer every que                                    | , attach a separate sheet to                                 |   |  |   |
| Pa  | rt 1: Give Details About Your Ma   | rital Status and Where You                                   | Lived Before  |  |   |
| 1.  | What is your current marital statu   | ıs?  |   |  |   |
|   | ☐ Married ☐ Not married  |  |   |  |   |
| 2.  | During the last 3 years, have you  | lived anywhere other than                                    | where you live now?                                   |  |   |
|   | <ul><li>No</li><li>Yes. List all of the places you I</li></ul>   | ived in the last 3 years. Do no                              | ot include where you live nov                         | ı.   |   |
|   | Debtor 1:  | Dates Debtor 1 lived there                                   | Debtor 2 Prior Ac                                     | ldress:                                    | Dates Debtor 2<br>lived there                         |
| <b>3.</b><br>sta  | Within the last 8 years, did you ever tes and territories include Arizona, Ca  |  |   |  |   |
|   | <ul><li>No</li><li>Yes. Make sure you fill out Sch</li></ul>   | nedule H: Your Codebtors (Of                                 | ficial Form 106H).                                    |  |   |
| Pa  | rt 2 Explain the Sources of You  | r Income   |   |  |   |
| 4.  | Did you have any income from er Fill in the total amount of income yo If you are filing a joint case and you  ☐ No ☐ Yes. Fill in the details. | nployment or from operatin<br>u received from all jobs and a | all businesses, including part                        | -time activities.                          | ndar years?   |
|   |  | Debtor 1   |   | Debtor 2                                   |   |
|   |  | Sources of income<br>Check all that apply.                   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: |  | ☑ Wages, commissions, bonuses, tips                          | \$2,925.00  |  | \$2,925.00  |
|   |  | Operating a business   |   | Operating a business                       |   |
| For last calendar year:<br>(January 1 to December 31, 2024)             |  |  | \$23,400.00   |  | \$23,400.00   |
| •   | . ,  | ☐ Operating a business                                       |   | ☐ Operating a business                     |   |

Official Form 107

|    |  | ahadai Bha  |   |  |  |   | Cas   | se number (if known)   |   |   |
|----|--|---|---|--|--|---|---|--|---|---|
|    |  |   |   | Dahtan 4   |  |   |   | Dahtan 0   |   |   |
|    |  |   |   |  | of income<br>I that apply.   |   | s income<br>e deductions and<br>sions)  | Sources of inc<br>Check all that a   |   | Gross income<br>(before deductions<br>and exclusions) |
|    |  | dar year be<br>December                                     |   | ⊠ Wage bonuses,  | s, commissions,<br>tips  |   | \$23,400.00   | ⊠ Wages, com<br>bonuses, tips  | missions,   | \$23,400.00   |
|    |  |   |   | ☐ Opera  | ating a business   |   |   | ☐ Operating a  | business  |   |
| 5. | Include include and other winnings.  List each s | come regard<br>public benef<br>If you are fili              | less of wheth<br>it payments;<br>ng a joint cas<br>he gross inco  | ner that inco<br>pensions; r<br>se and you   | ome is taxable. Ex<br>rental income; inte<br>have income that  | amples of<br>rest; divid<br>you recei   |   | alimony; child supp<br>cted from lawsuits;<br>only once under De   | royalties, ar<br>ebtor 1.   | Security, unemployment,<br>nd gambling and lottery    |
|    |  | r iii iir trio de   | tailo.  |  |  |   |   |  |   |   |
|    |  |   |   | Debtor 1<br>Sources<br>Describe  | of income<br>below.  | each s  | s income from<br>source<br>e deductions and<br>sions)   | Debtor 2<br>Sources of inc<br>Describe below   |   | Gross income<br>(before deductions<br>and exclusions) |
| Pa | rt 3: List                                       | Certain Pa  | yments You  | Made Bef   | ore You Filed for  | Bankrup   | tcy   |  |   |   |
| 6. | □ No.  | During the No. Yes  * Subject to Debtor 1 of                | potent 1 nor Eprimarily for a 90 days befor 50 to line 7 List below 6 paid that cr not include to adjustmen or Debtor 2 co 90 days befor 50 to line 7 List below 6 include pay attorney for | Debtor 2 has a personal, to per | family, or household for bankruptcy, do not include payment to an attorney for to an attorney for to an attorney for to an attorney for to bankruptcy, do not to whom you patdomestic support of | umer debold purpos id you pay id a total of this bankris after the umer debold you pay id a total of bobligations | e."  y any creditor a total of \$7,575* or more mestic support obliquately case. at for cases filed or ots. y any creditor a total of \$600 or more an s, such as child sup | al of \$7,575* or mo in one or more pay gations, such as ch or after the date of al of \$600 or more? d the total amount port and alimony. | re?<br>/ments and<br>iild support a<br>f adjustmen<br>o<br>you paid tha<br>Also, do not |   |
|    | Orealtor   | 3 Name and  | Addiess   |  | Dates of payme   | JIIL  | paid  | still owe  | was tills   | payment for   |
| 7. | Insiders in corporatio including of support ar   | clude your r<br>ns of which<br>one for a bus<br>nd alimony. | elatives; any<br>you are an o   | general pa<br>fficer, direct<br>perate as a  | rtners; relatives of<br>tor, person in cont  | any generol, or owr   |   | erships of which yo<br>of their voting sec   | u are a gene<br>urities; and  |   |
|    |  | Name and  |   |  | Dates of payme   | ent   | Total amount  | Amount you   | Reason fo   | or this payment                                       |
|    |  |   |   |  |  |   | paid  | still owe  |   |   |

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|  | otor 1 Krishna Bhagwandeen otor 2 Mahadai Bhagwandeen  |  | Case number (  | if known)                         |                              |
|--|--|--|--|-----------------------------------|------------------------------|
| 8.   | Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos                                    |  | ments or transfer any proper   | ty on account of a d              | ebt that benefited an        |
|  | <ul><li>No</li><li>Yes. List all payments to an insider</li></ul>  |  |  |                                   |                              |
|  | Insider's Name and Address   | Dates of payment                             | Total amount Amount paid still   | t you Reason for owe Include cred | this payment<br>litor's name |
| Par  | t 4: Identify Legal Actions, Repossession  | ns, and Foreclosures                         |  |                                   |                              |
| 9.   | Within 1 year before you filed for bankruptor List all such matters, including personal injury modifications, and contract disputes. |  |  |                                   |                              |
|  | <ul><li>No</li><li>✓ Yes. Fill in the details.</li></ul>   |  |  |                                   |                              |
|  | Case title Case number   | Nature of the case                           | Court or agency  | Status of th                      | e case                       |
|  | Wint v. Larrys Furniture Inc. et al 24-cv-02200-HG   | Employment                                   | Eastern District of NY<br>(Brooklyn), Alexander<br>Hamilton Custom House | ☐ Pending ☐ On app ☐ Conclud      | eal                          |
|  | Franpo Realty, LLC v. Power<br>Furniture Inc. et al<br>651022/2020   | Contract                                     | New York Supreme Court<br>60 Centre Street<br>New York, NY 10007         | Pendin                            | eal                          |
| <ul> <li>10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, Check all that apply and fill in the details below.</li> <li>☑ No. Go to line 11.</li> <li>☐ Yes. Fill in the information below.</li> </ul> |  | d, seized, or levied?                        |  |                                   |                              |
|  | Creditor Name and Address  | Describe the Property  Explain what happened | d  | Date                              | Value of the<br>property     |
| 11.  | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec   ○ No ○ Yes. Fill in the details.              |  | luding a bank or financial ins   | titution, set off any a           | amounts from your            |
|  | Creditor Name and Address  | e creditor took                              | Date action was taken  | Amount                            |                              |
| 12.  | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a   No Yes                                    |  | erty in the possession of an a   | ssignee for the ben               | efit of creditors, a         |
| Par  | t 5: List Certain Gifts and Contributions  |  |  |                                   |                              |
| 13.  | Within 2 years before you filed for bankrup  ☐ No ☐ Yes. Fill in the details for each gift.  | tcy, did you give any gift                   | s with a total value of more th  | nan \$600 per person              | ?                            |
|  | Gifts with a total value of more than \$600 per person   | Describe the gifts                           |  | Dates you gave the gifts          | Value                        |
|  | Person to Whom You Gave the Gift and Address:  |  |  |                                   |                              |
|  | Govind Maja  | 2011 Honda Pilot                             | i .  |                                   | \$9,000.00                   |
|  | Person's relationship to you:  |  |  |                                   |                              |

|     | btor 1 Krishna Bhagwandeen<br>btor 2 <u>Mahadai Bhagwandeen</u>  |              |   | Case number (   | if known)                                |                           |
|-----|--|--------------|---|-----------------|--|---------------------------|
| 14. | Within 2 years before you filed for bank  ☑ No ☐ Yes. Fill in the details for each gift or   |              | you give any gifts or contribution  | าร with a tota  | I value of more than                     | \$600 to any charity?     |
|     | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo   |              | escribe what you contributed  |                 | Dates you contributed                    | Value                     |
| Pai | rt 6: List Certain Losses  |              |   |                 |  |                           |
| 15. | Within 1 year before you filed for bankridisaster, or gambling?  | uptcy or sin | ce you filed for bankruptcy, did y  | ou lose anyt    | hing because of the                      | ft, fire, other           |
|     | <ul><li>No</li><li>Yes. Fill in the details.</li></ul>   |              |   |                 |  |                           |
|     | Describe the property you lost and how the loss occurred   | Include the  | any insurance coverage for the lost amount that insurance has paid. Lost claims on line 33 of Schedule A/B: | ist pending     | Date of your loss                        | Value of property<br>lost |
| Pai | rt 7: List Certain Payments or Transfer  | 's           |   |                 |  |                           |
| 16. | Within 1 year before you filed for bankruconsulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  No Yes. Fill in the details.  | preparing a  | bankruptcy petition?  | . ,             | 7  | erty to anyone you        |
|     | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not   | tr           | escription and value of any prop<br>ansferred   | erty            | Date payment or transfer was made        | Amount of payment         |
|     | Bronson Law Offices, PC<br>480 Mamaroneck Ave<br>HarrisonHarrison, NY 10528<br>hbbronson@bronsonlaw.net  |              | ttorney Fee   |                 |  | \$3,313.00                |
| 17. | Within 1 year before you filed for bankry promised to help you deal with your cree Do not include any payment or transfer that   | ditors or to | make payments to your creditor  |                 | r transfer any prope                     | erty to anyone who        |
|     | <ul><li>No</li><li>Yes. Fill in the details.</li></ul>   |              |   |                 |  |                           |
|     | Person Who Was Paid<br>Address   |              | escription and value of any prop<br>ansferred   | erty            | Date payment<br>or transfer was<br>made  | Amount of payment         |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do no include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. |              |   |                 |  |                           |
|     | Person Who Received Transfer<br>Address  |              | escription and value of roperty transferred   |                 | nny property or received or debts change | Date transfer was made    |
| 19. | Person's relationship to you  Within 10 years before you filed for ban   |              |   | elf-settled tru | ıst or similar device                    | of which you are a        |
|     | <ul><li>beneficiary? (These are often called asse</li><li>No</li><li>Yes. Fill in the details.</li></ul>   | t-protection | aevices.)   |                 |  |                           |
|     | Name of trust  | D            | escription and value of the prope   | erty transferro | ed                                       | Date Transfer was made    |

|     | btor 1<br>btor 2   | Krishna Bhagwandeen<br>Mahadai Bhagwandeen   |  | c  | Case number (if known)   |   |
|-----|--|--|--|--|--|---|
| Pai | rt 8:  | List of Certain Financial Accounts, In   | struments, Safe Deposit  | Boxes, and Stor                                      | rage Units   |   |
| 20. | <ul> <li>Within 1 year before you filed for bankruptcy, sold, moved, or transferred?</li> <li>Include checking, savings, money market, or houses, pension funds, cooperatives, associa</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul> |  | or other financial accou   | nts; certificates o                                  | of deposit; shares in banks, cro                               | •   |
|     |  | ne of Financial Institution and<br>ress (Number, Street, City, State and ZIP<br>)  | Last 4 digits of account number  | Type of accoun instrument                            | nt or Date account was closed, sold, moved, or transferred     | Last balance<br>before closing or<br>transfer |
| 21. |  | ou now have, or did you have within 1 y<br>, or other valuables?   | year before you filed for  | bankruptcy, any                                      | safe deposit box or other dep                                  | pository for securities,                      |
|     | =  | No<br>Yes. Fill in the details.  |  |  |  |   |
|     |  | ne of Financial Institution ress (Number, Street, City, State and ZIP Code)  | Who else had acc<br>Address (Number, Si<br>State and ZIP Code)   |  | Describe the contents  | Do you still have it?                         |
| 22. | □ 1  | you stored property in a storage unit on No<br>Yes. Fill in the details.   | or place other than your   | home within 1 ye                                     | ear before you filed for bankru                                | ıptcy?  |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)   |  | to it?   | Address (Number, Street, City,                       |  | Do you still have it?                         |
| Pa  | rt 9:  | Identify Property You Hold or Control  | for Someone Else   |  |  |   |
| 23. | -  | ou hold or control any property that so<br>omeone.   | meone else owns? Inclu   | ude any property                                     | you borrowed from, are storing                                 | ng for, or hold in trust                      |
|     | =  | No<br>Yes. Fill in the details.  |  |  |  |   |
|     |  | ner's Name<br>ress (Number, Street, City, State and ZIP Code)  | Where is the prop<br>(Number, Street, City, S<br>Code)   |  | Describe the property  | Value   |
| Pa  | rt 10:   | Give Details About Environmental Info  | ormation   |  |  |   |
| For | the pu   | urpose of Part 10, the following definiti  | ons apply:   |  |  |   |
|     | toxic<br>regul<br>Site r<br>to ow<br>Haza  | ronmental law means any federal, state substances, wastes, or material into the lations controlling the cleanup of these means any location, facility, or property on, operate, or utilize it, including disportations material means anything an envirous material, pollutant, contaminant, | he air, land, soil, surface<br>s substances, wastes, or<br>y as defined under any e<br>osal sites.<br>ironmental law defines a | e water, groundw<br>r material.<br>environmental lav | ater, or other medium, includi<br>w, whether you now own, oper | ng statutes or<br>rate, or utilize it or used |
| Rep | ort all  | notices, releases, and proceedings the   | at you know about, rega  | rdless of when th                                    | hey occurred.  |   |
| 24. | Has a  | any governmental unit notified you tha   | t you may be liable or po  | otentially liable u                                  | ınder or in violation of an envi                               | ronmental law?                                |
|     | _  | No<br>Yes. Fill in the details.  |  |  |  |   |
|     |  | ne of site<br>ress (Number, Street, City, State and ZIP Code)  | Governmental uni<br>Address (Number, St<br>ZIP Code)   |  | Environmental law, if you know it                              | Date of notice                                |
|     |  |  |  |  |  |   |

Case 1-25-40906-ess Doc 1 Filed 02/21/25 Entered 02/21/25 17:58:04 Krishna Bhagwandeen Debtor 1 Mahadai Bhagwandeen Debtor 2 Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership An officer, director, or managing executive of a corporation ☑ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. **Address** (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed EIN: Larry's Furniture Inc. Furniture store 82-5322151 1730 Pitkin Ave From-To 2018 - Present Brooklyn, NY 11212 ELY BANGIYEV, EA 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Krishna Bhagwandeen /s/ Mahadai Bahagwandeen Krishna Bhagwandeen Mahadai Bhagwandeen Signature of Debtor 1 Signature of Debtor 2 February 21, 2025 Date February 21, 2025 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ⊠ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

| Fill in this ir                      | nformation to identify you   | ır case:   |                  |                      |                                      |                           |                              |                            |                                   |                              |
|--------------------------------------|--|--|------------------|----------------------|--------------------------------------|---------------------------|------------------------------|----------------------------|-----------------------------------|------------------------------|
| Debtor 1                             | Krishna Bhagwande  | en   |                  |                      |                                      |                           |                              |                            |                                   |                              |
| D.1.1.0                              | <del></del>  |  |                  |                      |                                      |                           |                              |                            |                                   |                              |
| Debtor 2<br>(Spouse, if fi           | Mahadai Bhagwande<br>ling)   | een  |                  |                      |                                      |                           |                              |                            |                                   |                              |
| United States                        | s Bankruptcy Court for the:  | Eastern District of I  | New Y            | ork                  |                                      |                           |                              |                            |                                   |                              |
| Case numbe<br>(if known)             | er   |  |                  |                      |                                      | ☐ Check                   | if this is an                | amended                    | filing                            |                              |
| Official I                           | Form 122B  |  |                  |                      |                                      |                           |                              |                            |                                   |                              |
|                                      | r 11 Statement   | of Your Cu   | rrei             | nt Mo                | onthly In                            | come                      |                              |                            |                                   | 12/21                        |
| needed, atta<br>pages, write         | e this form if you are an ir<br>ch a separate sheet to thi<br>your name and case num<br>Calculate Your Current M                         | s form. Include the I<br>ber (if known).                                   | -                |                      | -                                    |                           |                              |                            |                                   |                              |
| 1. What is                           | your marital and filing s  | tatus? Check one onl   | у.               |                      |                                      |                           |                              |                            |                                   |                              |
|                                      | ,  |  | ,                |                      |                                      |                           |                              |                            |                                   |                              |
| ☐ Not                                | married. Fill out Column A   | , lines 2-11.  |                  |                      |                                      |                           |                              |                            |                                   |                              |
| ⊠ Marı                               | ried and your spouse is fi   | ling with you. Fill ou   | t both           | Columns              | A and B, lines                       | 2-11.                     |                              |                            |                                   |                              |
| ☐ Marı                               | ried and your spouse is N  | IOT filing with you. F   | ill out          | Column               | A, lines 2-11.                       |                           |                              |                            |                                   |                              |
|                                      |  |  |                  |                      |                                      |                           |                              |                            |                                   |                              |
| 11 U.S.C.<br>monthly in<br>amount me | average monthly income<br>§ 101(10A). For example, income varied during the 6 nore than once. For example report for any line, write \$0 | f you are filing on Sep<br>nonths, add the incom<br>e, if both spouses own | tembe<br>e for a | er 15, the           | 6-month period<br>ths and divide the | d would be<br>he total by | March 1 th<br>6. Fill in the | rough Augı<br>e result. Do | ust 31. If the a<br>not include a | amount of your<br>any income |
|                                      |  |  |                  |                      |                                      | Column A Debtor 1         |                              | Column I                   |                                   |                              |
|                                      | ross wages, salary, tips, I  | oonuses, overtime, a   | nd co            | mmissio              | ons (before all                      | \$ 1                      | ,750.00                      | \$                         | 1,750.00                          |                              |
| . ,                                  | ueductions).<br>ly and maintenance paym  | ents Do not include  | navme            | ents from            | a snouse if                          | Φ                         | ,730.00                      | Φ                          | 1,730.00                          |                              |
|                                      | B is filled in.  | cinco. Do not morado   | Jayine           | 1110 110111          | и орошос п                           | \$                        | 0.00                         | \$                         | 0.00                              |                              |
| <b>of you</b> from an<br>and roo     | ounts from any source whor your dependents, include unmarried partner, membersmates. Include regular co. Do not include payments y       | uding child support.<br>ers of your household<br>ontributions from a spo   | Includ<br>your   | e regulaı<br>depende | contributions<br>nts, parents,       | ¢.                        | 0.00                         | \$                         | 0.00                              |                              |
|                                      | ome from operating a   | ou listed on line 3.   |                  |                      |                                      | \$                        | 0.00                         | Φ                          | 0.00                              |                              |
|                                      | ss, profession, or farm  | Debtor 1   | Dek              | otor 2               |                                      |                           |                              |                            |                                   |                              |
| Gross re                             | eceipts (before all deductio   | ns)  | \$_              | 0.00                 |                                      |                           |                              |                            |                                   |                              |
|                                      | y and necessary operating  | •  | -\$_             | 0.00                 |                                      |                           |                              |                            |                                   |                              |
|                                      | nthly income from a busine   | ss, profession, or farn  | ո \$             | 0.00                 | Copy here ->                         | \$                        | 0.00                         | \$                         | 0.00                              |                              |
|                                      | ome from rental and eal property   | Debtor 1   | Del              | otor 2               |                                      |                           |                              |                            |                                   |                              |
|                                      | eceipts (before all deductio   |  | \$               | 0.00                 |                                      |                           |                              |                            |                                   |                              |
|                                      | y and necessary operating  | •  | -\$              | 0.00                 |                                      |                           |                              |                            |                                   |                              |
|                                      | nthly income from rental or  | •  | \$               |                      | Copy here ->                         | \$                        | 0.00                         | \$                         | 0.00                              |                              |

Official Form 122B

Krishna Bhagwandeen Debtor 1 Mahadai Bhagwandeen Debtor 2 Case number (if known) Column A Column B Debtor 1 Debtor 2 7. Interest, dividends, and royalties 0.00 0.00 0.00 0.00 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you .....\$ \_\_\_\_\_\$ For your spouse.....\$ 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired 0.00 under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 1,750.00 \$ 1,750.00 3.500.00

#### 

| Debtor 1<br>Debtor 2 | Krishna Bhagwandeen<br>Mahadai Bhagwandeen   | Case number (if known)   |
|----------------------|--|--|
| Part 2:              | Sign Below   |  |
|                      | By signing here, under penalty of perjury I declare that the inform  X /s/ Krishna Bhagwandeen  Krishna Bhagwandeen  Signature of Debtor 1 | X /s/ Mahadai Bahagwandeen Mahadai Bhagwandeen Signature of Debtor 2 |
| Da                   | te February 21, 2025<br>MM / DD / YYYY   | Date February 21, 2025 MM / DD / YYYY                                |

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B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court Eastern District of New York**

| In re |  | Krishna Bhagwandeen<br>Mahadai Bhagwandeen  |   | Case No.                             |  |  |  |  |  |
|-------|--|---|---|--------------------------------------|--|--|--|--|--|
| 111   |  | manadar briagwandeen  | Debtor(s)   | Chapter                              | 11                                     |  |  |  |  |
|       |  | DISCLOSURE OF COMPENS.  | ATION OF ATTORNE  | EY FOR DI                            | EBTOR(S)                               |  |  |  |  |
| 1.    | pai  | suant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), It to me within one year before the filing of the petition in alf of the debtor(s) in contemplation of or in connection v | I certify that I am the attorney for bankruptcy, or agreed to be paid | or the above nar<br>d to me, for ser | ned debtor(s) and that compensation    |  |  |  |  |
|       |  | FLAT FEE  |   |                                      |  |  |  |  |  |
|       |  | For legal services, I have agreed to accept   |   | \$                                   |  |  |  |  |  |
|       |  | Prior to the filing of this statement I have received   |   |                                      |  |  |  |  |  |
|       |  | Balance Due   |   |                                      |  |  |  |  |  |
|       | $\boxtimes$  | RETAINER  |   |                                      |  |  |  |  |  |
|       |  | For legal services, I have agreed to accept and received  | a retainer of   | \$                                   | 3,313.00                               |  |  |  |  |
|       |  | The undersigned shall bill against the retainer at an hou [Or attach firm hourly rate schedule.] Debtor(s) have ag fees and expenses exceeding the amount of the retainer         | greed to pay all Court approved                                       | \$                                   | 525.00                                 |  |  |  |  |
| 2.    | The  | source of the compensation paid to me was:  |   |                                      |  |  |  |  |  |
|       |  | □ Debtor □ Other (specify):   |   |                                      |  |  |  |  |  |
| 3.    | The  | source of compensation to be paid to me is:   |   |                                      |  |  |  |  |  |
|       |  | ☐ Debtor ☐ Other (specify):   |   |                                      |  |  |  |  |  |
| 4.    | $\boxtimes$  | I have not agreed to share the above-disclosed compensation   | ation with any other person unles                                     | ss they are mem                      | nbers and associates of my law firm.   |  |  |  |  |
|       |  | I have agreed to share the above-disclosed compensation of the agreement, together with a list of the names of the  |   |                                      |  |  |  |  |  |
| 5.    | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  |   |   |                                      |  |  |  |  |  |
|       | <ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;</li> <li>e. [Other provisions as needed]</li> </ul> |   |   |                                      |  |  |  |  |  |
| 6.    | Ву   | agreement with the debtor(s), the above-disclosed fee do  | es not include the following serv                                     | ice:                                 |  |  |  |  |  |
|       |  | C   | CERTIFICATION   |                                      |  |  |  |  |  |
| ban   |  | rtify that the foregoing is a complete statement of any agreey proceeding.  | reement or arrangement for paym                                       | nent to me for re                    | epresentation of the debtor(s) in this |  |  |  |  |
|       | Feb  | ruary 21, 2025  | /s/ H Bruce Bronson   |                                      |  |  |  |  |  |
|       | Date   |   | H Bruce Bronson   |                                      |  |  |  |  |  |
|       |  |   | Signature of Attorney Bronson Law Offices P                           | С                                    |  |  |  |  |  |
|       |  |   | 480 Mamaroneck Ave  |                                      |  |  |  |  |  |
|       |  |   | HarrisonHarrison, NY 1<br>(914) 269-2530 Fax:                         |                                      | 06                                     |  |  |  |  |
|       |  |   | hbbronson@bronsonla   |                                      | JO                                     |  |  |  |  |
|       |  |   | Name of law firm  |                                      |  |  |  |  |  |

## **United States Bankruptcy Court Eastern District of New York**

| In re | Krishna Bhagwandeen<br>Mahadai Bhagwandeen |           | Case No. |    |
|-------|--|-----------|----------|----|
|       |  | Debtor(s) | Chapter  | 11 |

### **VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

| Date: | February 21, 2025 | /s/ Krishna Bhagwandeen Krishna Bhagwandeen |
|-------|-------------------|---|
|       |                   | Signature of Debtor                         |
| Date: | February 21, 2025 | /s/ Mahadai Bahagwandeen                    |
|       |                   | Mahadai Bhagwandeen                         |
|       |                   | Signature of Debtor                         |
| Date: | February 21, 2025 | /s/ H Bruce Bronson                         |
|       |                   | Signature of Attorney                       |
|       |                   | H Bruce Bronson                             |
|       |                   | Bronson Law Offices PC                      |
|       |                   | 480 Mamaroneck Ave                          |
|       |                   | HarrisonHarrison, NY 10528                  |
|       |                   | (914) 269-2530 Fax: (888) 908-6906          |

USBC-44 Rev. 9/17/98

Adam Sackowitz Katz Melinger PLLC 280 Madison Ave., Suite 600 New York, NY 10016

Alister Wint C/O Jesse S. Barton, Esq. CSM Legal P.C. 60 East 42nd Street Suite New York, NY 10165

Amex PO Box 981537 El Paso, TX 79998-1537

Amex Correspondence/Bankruptcy PO Box 981535 El Paso, TX 79998-1535

Caliber Home Loans, In 601 Office Center Dr Fort Washington, PA 19034-3275

Caliber Home Loans, In Attn: Bankruptcy 1525 S Belt Line Rd Coppell, TX 75019-4913

Capital One PO Box 31293 Salt Lake City, UT 84131-0293

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285

Discover Financial PO Box 30939 Salt Lake City, UT 84130-0939

Discover Financial Attn: Bankruptcy PO Box 3025 New Albany, OH 43054-3025

Franpo Realty, LLC 42 West 42nd St. 2nd Floor Brooklyn, NY 11212

Jpmcb PO Box 15369 Wilmington, DE 19850-5369 Jpmcb MailCode LA4-7100 700 Kansas Ln Monroe, LA 71203-4774

Macy's/ DSNB PO Box 6789 Sioux Falls, SD 57117-6789

Macy's/ DSNB Atytn: Bankruptcy 701 E 60th St N Sioux Falls, SD 57104-0432

Nordstrom FSB 13531 E Caley Ave Englewood, CO 80111-6504

Nordstrom FSB ATTN: Bankruptcy PO Box 6555 Englewood, CO 80155-6555

Regina Felton Felton & Associates 1371 Fulton Street Brooklyn, NY 11216

Verizon Wireless Minneapolis, MN 55426

Verizon Wireless Attn: Bankruptcy 500 Technology Dr Ste 599 Weldon Spring, MO 63304-2225 

## UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

# STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

| <b>DEBTOR(S):</b>  | Krishna Bhagwandeen<br>Mahadai Bhagwandeen  | CASE NO.:.   |
|--|---|--|
|  |   | 2(b), the debtor (or any other petitioner) hereby makes the following disclosure mowledge, information and belief:   |
| was pending at any t<br>spouses or ex-spouse<br>partnership and one<br>have, or within 180 ( | ime within eight years before tes; (iii) are affiliates, as defined or more of its general partners | or purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are d in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a ; (vi) are partnerships which share one or more common general partners; or (vii) either of the Related Cases had, an interest in property that was or is included in the ).] |
| NO RELATED   | CASE IS PENDING OR HAS  | S BEEN PENDING AT ANY TIME.  |
| ☐ THE FOLLOW   | TING RELATED CASE(S) IS   | PENDING OR HAS BEEN PENDING:   |
|  |   |  |
| 1. CASE NO.:   | JUDGE: DISTR  | ICT/DIVISION:  |
|  | DING (Y/N):   |  |
| CURRENT STATU  | JS OF RELATED CASE:   | (Discharged/awaiting discharge, confirmed, dismissed, etc.)  |
|  |   | (Discharged/awaiting discharge, confirmed, dismissed, etc.)  |
| MANNER IN WHI  | CH CASES ARE RELATED  | (Refer to NOTE above):   |
|  | LISTED IN DEBTOR'S SCH<br>FRELATED CASE:  | EDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN   |
| 2. CASE NO.:   | JUDGE: DISTR  | ICT/DIVISION:  |
| CASE STILL PEND  | OING (Y/N):   | [If closed] Date of closing:   |
| CURRENT STATU  | JS OF RELATED CASE:   |  |
|  |   | (Discharged/awaiting discharge, confirmed, dismissed, etc.)  |
| MANNER IN WHI  | CH CASES ARE RELATED  | (Refer to NOTE above):   |
|  | LISTED IN DEBTOR'S SCH<br>F RELATED CASE:   | EDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN   |
| 3. CASE NO.:   | JUDGE: DISTR  | ICT/DIVISION:  |
| CASE STILL PEND  | DING (Y/N):   | [If closed] Date of closing:   |

| DISCLOSURE OF RELATED CASES (cont'd)  |   |
|---|---|
| CURRENT STATUS OF RELATED CASE:   | scharged/awaiting discharge, confirmed, dismissed, etc.)  |
|   |   |
| MANNER IN WHICH CASES ARE RELATED (Refer to 1   | NOTE above):  |
| REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A SCHEDULE "A" OF RELATED CASE:  | A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN   |
| NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals we be eligible to be debtors. Such an individual will be require                                    | who have had prior cases dismissed within the preceding 180 days may not ed to file a statement in support of his/her eligibility to file.  |
| TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTO   | ORNEY, AS APPLICABLE:   |
| I am admitted to practice in the Eastern District of New York   | k (Y/N):Y   |
| CERTIFICATION (to be signed by pro se debtor/petitioner of I certify under penalty of perjury that the within bankruptcy as indicated elsewhere on this form. | or debtor/petitioner's attorney, as applicable): case is not related to any case now pending or pending at any time, except   |
| /s/ H Bruce Bronson   |   |
| H Bruce Bronson Signature of Debtor's Attorney Bronson Law Offices PC 480 Mamaroneck Ave  | Signature of Pro Se Debtor/Petitioner   |
| HarrisonHarrison, NY 10528<br>(914) 269-2530 Fax:(888) 908-6906   | Signature of Pro Se Joint Debtor/Petitioner   |
|   | Mailing Address of Debtor/Petitioner  |
|   | City, State, Zip Code   |
|   | Area Code and Telephone Number ed by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any including without limitation conversion, the appointment of a trustee or the |

F dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

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